



APPLICATION FOR CERTIFICATE OF TITLE FOR A VEHICLE

State Form 205 (R10 / 11-18)
INDIANA BUREAU OF MOTOR VEHICLES

*This agency is requesting disclosure of your Social Security Number / Federal Identification Number in accordance with IC 4-1-8-1; disclosure is mandatory, and this record cannot be processed without it.

To be completed by a police officer, BMV official, or BMV certified dealer signee for out-of-state titles. I hereby certify that I personally examined the following vehicle and find the identification number to be as follows.					I swear or affirm that I am authorized to perform this transaction, and I agree to indemnify and hold harmless the Indiana BMV from any and all liability arising from this transaction.						
Vehicle Identification Number <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> <div style="border-bottom: 1px solid black; width: 20px; height: 20px;"></div> </div>					I swear or affirm that the information that I have entered on this form is correct. I understand that making a false statement on this form may constitute the crime of perjury.						
Year	Make	Model	Type	Date (mm/dd/yyyy)		Applicant Signature: _____					
Inspector's Printed Name and Title			City			Printed Name: _____					
Inspector's Signature		Badge, Branch, or Dealer Plate Number				Applicant Signature: _____					
Transaction Number					Branch Number		Invoice Number		BMV Use Only		
Social Security Number / Federal Identification Number *				Name of Applicant				BMV Use Only			
Residence Address (number and street)						City		State	ZIP Code		
Vehicle Identification Number			Vehicle Year	Vehicle Make		Vehicle Model	Vehicle Type	Odometer			
Former Title Number		Purchase Date (mm/dd/yy)		Lien (Y/N)	Speed (Y/N)	Dealer Number		BMV Use Only			
Holder of First Lien, Mortgage, or Other Encumbrance / Special Mailing Address					Mailing Address (number and street)						
City				State	ZIP Code		BMV Use Only				
Holder of Second Lien, Mortgage, or Other Encumbrance					Mailing Address (number and street)						
City		State	ZIP Code		License Number		License Year	Forms Used	BMV Use Only		
Gross Retail and Use Tax Affidavit – I/We hereby certify that sales or use tax on this vehicle was paid as indicated below.											
Selling Price		Less Trade-In / Discount		Amount Subject to Tax		Amount of Tax		Dealer	Branch	Exempt	Exemption Code
\$		\$		\$		\$					