



AFFIDAVIT OF OWNERSHIP FOR A VEHICLE

State Form 23037 (R7 / 4-11)
INDIANA BUREAU OF MOTOR VEHICLES

BUREAU OF MOTOR VEHICLES
100 North Senate Avenue, N411
Indianapolis, IN 46204

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

- INSTRUCTIONS:**
1. An applicant who is unable to obtain a properly executed title for a vehicle may present the below form to obtain a certificate of title.
 2. Please complete in blue or black ink or print form.
 3. The retail value of the vehicle must meet the requirements as determined by the Bureau.
 4. The purchaser must have a notarized Bill of Sale or a Bill of Sale signed under penalty of perjury which indicates the vehicle's year, make, VIN, seller, purchaser, and purchase price. Sales tax will be assessed by the amount indicated on the Bill of Sale.
 5. An unopened, unclaimed certified letter to the seller's (and lien holder, if applicable) last known address requesting the title must be presented with this affidavit. A copy of the unopened letter should be included to confirm the request for the title to the vehicle in question. Do not open the original letter.
 6. Include a lien release, if necessary.
 7. A VIN inspection completed by law enforcement is required.
 8. Include an Odometer Disclosure Statement, if applicable

PURCHASER INFORMATION

Purchaser's Name (last, first, middle initial or company name)				Social Security Number* or Federal Identification Number			
Purchaser's Legal Address (number and street)			City		State	ZIP Code	

VEHICLE INFORMATION

Vehicle Identification Number	Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Type	Vehicle Color	License Plate Number

SELLER INFORMATION

Seller's Name (last, first, middle initial or company name)				
Seller's Legal Address (number and street)		City	State	ZIP Code
Date of Sale (mm/dd/yyyy)		Purchase Price \$		

This affidavit is submitted to request the State of Indiana, Bureau of Motor Vehicles to issue an Indiana Certificate of Title.

I warrant and agree to defend this claim and to indemnify and hold harmless the Indiana Bureau of Motor Vehicles from any liability arising from this transaction.

I swear or affirm that the information that I have entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.

Signature of Purchaser	Printed Name	Date Signed (mm/dd/yyyy)
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