

STATE OF INDIANA

Eric J. Holcomb, Governor

Peter L. Lacy, Commissioner

MUNICIPAL CORPORATION AND LAW ENFORCEMENT

Watercraft Title and Registration Application Checklist

Title and registration applications for municipal corporations, including law enforcement, must be processed by the BMV Municipal Processing department. Prior to submitting each application, verify all required information is included. Contact (888) 692-6841 with any questions.

When submitting paperwork, include the following:

Title	Annlication	Requirements	
HILLO	ADDIICALIOII	Neudifellello	

	Application for Certificate of Watercraft Title – State Form 38529
	Original certificate of title or manufacturer's certificate of origin
	<u>Physical Inspection of a Vehicle or Watercraft – State Form 39530</u> . Required for watercraft purchased outside of Indiana.
	ST108E - Certificate of Gross Retail or Use Tax Exemption - State Form 48841 (Exemption 1)
	\$15.00 title application fee. A \$30.00 administrative penalty will be assessed if the title application packet is not received within 45 days after the date of purchase. Payable by MasterCard or Visa, check, electronic check, or money order.
Registı	ration Application Requirements
	Application for Municipal or Law Enforcement Watercraft Registration and Decals – State Form 35913
	Copy of Indiana certificate of title or Application for Certificate of Watercraft Title – State Form 38529 (if already titled to applicant)

For your convenience, the required forms are included with this checklist. The forms are also available at myBMV.com. Mail the completed packet to:

Indiana Bureau of Motor Vehicles Central Office Municipal Processing 100 North Senate Avenue, Room N415 Indianapolis, IN 46204

If the BMV determines that sufficient credible evidence exists to substantiate the applicant's claim of ownership, a title/registration will be issued. <u>If all required documents are not submitted or information is incomplete, the entire application will be returned.</u>

Please include this checklist with your application.



APPLICATION FOR CERTIFICATE OF WATERCRAFT TITLE

State Form 38529 (R7 / 7-16) Approved by State Board of Accounts, 2016 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 signee for out-of-state titles. following watercraft and find	I hereby cert	tify that I pers	sonally e	xamined the	I swear and affirm that I to indemnify and hold ha arising from this transact	armless th tion.	e Indiana E	BMV from a	any and all liability						
Hull Identification Number		1 1	ı		 I swear and 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	Registration	Numbor	Do	ate (mm/dd/yyyy)	Applicant Signature:										
real Iviane	Registration	vumber	De	ate (mm/ac/yyyy)	Printed Name:										
Inspector's Printed Name and Ti	tle	City	I		Applicant Signature:										
Inspector's Signature		Badge, Branch	n, or Deale	er Plate Number	Printed Name:										
		0 ,			Date (mm/dd/yyyy):										
Transaction Number	I	Branch Numbe	er Inv	voice Number	BMV Use Only										
Registration Number	1	Former Title N	umber		Purchase Date (mm/dd/yyyy										
								T=							
Series or Model		Hull Identificati	ion Numbe	er	Length	Year		Hull Type							
Watercraft Type	,	Watercraft Use	9		Propulsion Type Fuel Type										
Social Security Number / Federa	al Identification	Number *	Но	orsepower	Applicant's County of Residence										
Name of Applicant					Street Address (number and street)										
City															
Holder of First Lien, Mortgage, o	r Other Encum	brance / Spec	ial Mailing	Address	Mailing Address (number and street)										
City			St	ate	ZIP Code			BMV Use	Only						
Holder of Second Lien, Mortgage	e, or Other End	cumbrance			Mailing Address (number an										
0.1			Lou		7/D Code										
City			St	ate	ZIP Code Dealer Number										
Gross Retail and Use Tax A	ffidavit – I/W	e hereby cer	tify that s	ales or use tax o	n this watercraft was paid a	as indicate	ed below.								
Selling Price	Less Trade-In			Subject to Tax	Tax Amount of Tax Dealer Branch Exempt Exemption Code										
\$	\$		\$		\$										



PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R5 / 12-11) Approved by State Board of Accounts, 2011 INDIANA BUREAU OF MOTOR VEHICLES

INSTRUCTIONS: 1. Approved inspector must complete information in blue or black ink or print form.

- 2. The vehicle identification number (VIN) or hull identification number (HIN) must be inspected to verify the existence and condition of the number. An ownership document is not required to be submitted for inspection.
- 3. Inspections may be performed by an employee of a dealer designated by the Indiana Secretary of State, a military policeman
- assigned to a military post in Indiana, a police officer, or a designated employee of a BMV full or partial service license branch.

 4. Police officers completing this form may not charge a fee of more than \$5.00 for vehicles. No fee may be collected for watercraft inspections. Authorized Indiana dealers and BMV full or partial service license branches may not assess a fee.
- Dealers may not perform watercraft inspections.

	OWNER INFORMATION																		
Name (la	Name (last, first, middle initial or company name																		
Addross	/numbor	and atract)																	
Address	Address (number and street)																		
City														(State		Z	IP Code	
VEHICLE OR WATERCRAFT INFORMATION																			
Identific	Identification Number NONE (select if no identification number found															ound)			
	<u> </u>							L,											
Year		Make			Mode	el			Туре			Plate Nur	mber / Stat	е				tegistration pplicable	
For assembled vehicles or watercraft include serial numbers for major component parts if present:																			
Engine / Motor Transmission																			
Body Ch	assis									Fro	ont Assemb	ly							
Rear Clip	р									Fra	ime								
Other (s)	оесіту):																		
*IDAC	S / NC	IC Check	(required	l if fori	m is	comple	eted by a	a polic	e offi	cer)									
Date Ch	eck Perfo	rmed (mm/da	/уууу)	Comn	nents	3													
		firm that t e crime o			n I h	have er	ntered o	n this	forn	n is co	orrect. I	underst	and ma	king a fa	alse st	atem	ent m	nay	
Signatur							Printed	Name					Title					Date (mm/	dd/yyyy)
Badge / Branch / Dealer Number Police Department / Branch / Dealership												City					ZIP Code		
Telepho	ne Numb	er					Email A	Address	3										
()																		



INSTRUCTIONS: 1. Complete in blue or black ink or print form.

					VE	HICLE	OR WAT	TERCRA	FT INFO	RMATIC	ON								
	Vehicle or Hull Identification Number																		
	Y	'ear				Make				Мо	odel			on Numbe watercraft					
SALE INFORMATION																			
Purchase Price Date of Sale (mm/dd/yyyy)																			
Purcha	ser Name	e(s) (last, i	first, midd	lle initial or	company	/ name)													
Addres	s (numbe	er and stre	et)																
City											State				ZIP Code				
I swea	ar or aff	rtify that irm that the crime of the crime o	the infor	mation I							•	-	g a false	statem	ent may				
Printed	Seller N	ame (last,	first, mida	lle initial or	company	y name)													
Signatu	ure of Sel	ler											!	Date (mm	n/dd/yyyy)				
Printed	Seller N	ame (last,	first, mida	lle initial or	company	y name)							l						
	ar or aff ime of p	irm that t perjury.	he infor	mation e	entered	on this f	form is c	correct.	I unders	tand tha	at makin	ıg a fals	e staten	nent ma	y consti	ute			
Signatu	ure of Pur	chaser												Date (mn	n/dd/yyyy)				
Printed	Purchas	er Name (last, first,	middle initi	ial or com	npany nan	пе)						•						
Signatu	ure of Pur	chaser												Date (mm	n/dd/yyyy)				
Printed	Purchas	er Name (last, first,	middle initi	ial or com	npany nan	ne)						•						



Indiana Department of Revenue

Certificate of Gross Retail or Use Tax EXEMPTION for the Purchase of a

Motor Vehicle or Watercraft

NAME OF DEALER		Dealer's RRMC # ((Registered Reta	ail Merchant Certificate Number)
		TID# (10	0 digits)	LOC# (3 digits)
Dealer's FID # (Federal Identification Number, 9 digits)		Dealer's License	Number (sev	ven digits)
Address of Dealer	City		State	Zip Code
NAME OF PURCHASER(S) (PRINT OR TYPE)			SSN, TID	, OR FID # (Mandatory)
Address of Purchaser City	State		Zip Code	
7 daniese en l'alenacei	Clato		2.p 0000	
Vehicles Identificat	tion Information	of Burchasa		
VIN # (Vehicle Identification Number) or HIN # (Hull Identification Number)	Year	Make		Model/Length
				C
Calculation Of Purchase Price		Trade in	n Informati	ion
	\/INI # a			
1. Total Purchase Price	VIIN # (Vehicle I	dentification Number) or Hil	N # (Hull Identif	fication Number)
Trade-Allowance (Like-kind exchanges only)	Year	Make		Model/Length
	_	Wate		Wodel/Edilgar
3. Net Purchase Price (Line 1 minus Line 2)				
CALCULATION Of PURCHASE PRICE LINES 1,	2 & 3 MUST RE	COMPLETED FOR	ΔΙΙΕΥΕΜ	PTED PURCHASES
NEW RESIDENT STATEMENT Must Be Completed if Exemption #8 is			- ALLEXLIN	1 1201 OKOHAOLO
I certify that I became a resident of INDIANA on (month & year)	,			
My previous State of Residence was _	. I hereby certify	y that the above stater	ment is true a	and correct.
Date _ Signature of owner _				
SALES/USE Tax WORKSHEET To be completed if Sales and/or Use	Tax was paid to a	state other than India	ana, Exempt	ion # 15. See reverse
side. Date of Purchase				
Purchase price of property subject to sales/use tax		1. \$		
2. Indiana sales/use tax due: Multiply Line 1 by sales/use tax percentag	ge (7%)	2		
3. Credit for sales tax previously paid to another state		3		
(Do not include flat fees, local, and/or excise taxes.) In what state wa	as the tax paid?			
4. Total amount due: Subtract Line 3 from Line 2		4. \$		
DIRECT RELATIVE IDENTIFICATION EXEMPTION (Must Be Compl	leted if Exemption	# 11 is claimed, see	reverse side	e).
Name(s) on original title	Relati	onship of above partie	es	
Name(s) being added/deleted				
PUBLIC TRANSPORTATION EXEMPTION (Must be completed if exe	emption # 6 is clai	med and you are not	a school bu	s operator.)
USDOT # (U.S. Department of Transportation Number)				
I certify that the above vehicle or watercraft is exempt from sales/u that any sales tax credit shown as paid to an out of state dealer not provided the buyer with a check to be paid to the BMV. I und of perjury. Date Signature of Purchaser	using exemption	#15 was actually co	llected by the	

GENERAL INFORMATION

INDIANA CODE 6-2.5-9-6 requires that a person titling a vehicle or watercraft present certification indicating the state gross sales and use tax has been paid; otherwise, the payment of the tax must be made directly to a Bureau of Motor Vehicles license branch.

If NONE of the exemptions apply to the purchase, Form ST-108 must be completed by the dealer and the purchaser to indicate that the sales/use tax was collected by the dealer. The dealer is then required to submit the sales/use tax to the Department of Revenue.

a purchaser's ID# (SSN-Social Security #, TID - Indiana Taxpayer Identification #, FID - federal Identification #) is mandatory to claim an exemption. Calculation of Purchase Price lines #1, #2 and #3 must be completed for all exempted purchases. The exemption claim is not valid without providing a required ID# and Purchase Price information. Exemptions available are:

- 1. Vehicles or watercraft purchased by Indiana or Federal governmental units or their instrumentalities.
- 2. Vehicles or watercraft purchased by nonprofit organizations operated exclusively for religious, charitable, or educational purposes and using the vehicle for the purpose for which such organization is exempt. The applicant MUST indicate its 13 digit Indiana TID and LOC number on the front of the form. The nonprofit name must be on the title to claim this exemption.
- 3. Issue title for the sole purpose of adding lien holder information. This exemption is not available to add, delete, or change the name on a title.
- 4. Trucks, not to be licensed for highway use, and to be directly used in direct production of manufacturing, mining, refining or harvesting of agricultural commodities. Ready-mix concrete trucks are exempt under this paragraph even though they are to be licensed for highway use. **Vehicles registered with** *farm plates* are not exempt.
- 5. Sales of motor vehicles or watercraft to Registered Retail Merchants acquiring the vehicles or watercraft to rent, or lease to others and whose ordinary course of business is to rent or lease vehicles or watercraft to others.
- 6. Vehicles or watercraft to be predominately used for hire in public transportation. (Hauling for hire.) Your USDOT number must be shown on the reverse side of this form. Predominate use is greater than 50%.
- 7. Vehicles or watercraft transferred from one individual to another with no consideration involved or received as outright gift or inheritance. Assumption of loan payments by the purchaser constitutes consideration and is therefore NOT exempt unless the transferred party was listed on the original security agreement. A copy of the original security agreement must be submitted with the title paperwork.
- 8. **Vehicles** previously purchased, titled and licensed in another State or Country by a bonafide resident of that State or Country, who subsequently has become an Indiana resident, are exempt from Indiana sales/use tax upon titling and registration of the vehicle in Indiana. **Watercraft** previously purchased, titled, or licensed in another state, by a bonafide resident of that state, who subsequently has become an Indiana resident, are exempt from sales/use tax upon titling or registration of the watercraft in Indiana. The **New resident Statement** on the front of the form MUST be completed.
- 9. Vehicles or watercraft purchased to be immediately placed into inventory for resale. NonIndiana dealers must enter both their FID number and their state's Dealer License Number on this form in lieu of the Indiana TID number if they are not registered with the Indiana Department of Revenue. Note: Motor vehicle dealers are only exempt from sales tax on <a href="mexicolor:m
- 10. Vehicles or watercraft, not to be licensed for use, which are eligible for a repossession title issued by the State of Indiana as a result of a bonafide credit transaction or salvage title resulting from an insurance settlement.
- 11. Transactions consisting of adding or deleting a spouse, child, grandparent, parent, or sibling of the owner of a motor vehicle only per 6-2.5-5-15.5. **The Direct Relative Identification Statement on the front of the form MUST be completed.**
- 12. Vehicles or watercraft won as a prize in a raffle or drawing which were previously titled by a qualified nonprofit organization. A valid Federal Miscellaneous Income Statement, Form 1099-MISC or an affidavit completed by the nonprofit organization must be submitted with the title paperwork in order for this exemption to be claimed. The affidavits must state the nonprofit organization name and exemption number, the winner's name, address and social security number and the fair market value of the vehicle awarded as the prize.
- 13. Redemption of repossessed vehicles or watercraft by the original owner.
- 14. Indiana Department of Revenue use only. This exemption may not be used unless authorized by the Department by calling (317) 233-4017. A complete copy of each transaction claiming this exemption must be sent to IDOR, Compliance Division.
- 15. Sales tax paid to a non-BMV licensed dealer. The seller may be either an Indiana seller or an out of state seller. This amount will be used as a nonrefundable credit against the amount of Indiana sales tax due.

This agency is requesting the disclosure of your Social Security number in accordance with IC 4-1-8-1.

Disclosure is mandatory; this record cannot be processed without it.



APPLICATION FOR MUNICIPAL CORPORATION AND LAW ENFORCEMENT WATERCRAFT REGISTRATION

State Form 35913 (R10 / 7-17) Indiana Bureau of Motor Vehicles

BUREAU OF MOTOR VEHICLES

Municipal Processing 100 North Senate

INSTRUCTIONS:

- 1. Complete in blue or black ink, or print form.
- Complete all information in sections 1, 2, 3, and 4, as applicable, and mail to the address listed above.
 The application must be accompanied by a copy of proof of ownership (i.e., Certificate of Origin, Certificate of Title, or Bill of Sale).
- 4. Indicate in Section 3 which of the municipal classifications applies to the entity named on this application. The entity must submit the requested documentation or proof that the entity meets the indicated classification.

SECTION 1. APPLICANT INFORMATION														
Name of Owne	er									Federal lo	dentification	n Number		
	Street Address of Entity (number and street)													
Street Address	of Entity (number	and street)												
0.11					01-1-		710.0-1-	- 1	0 1		1	1.2.		
City					State IN		ZIP Code	'	County	/	Towns	snip		
Mailing Addres	s (if different from	street address)	1		City					State	ZIP C	ode		
										IN				
Name and Title	e of Entity's Execu	tive Officer			Telepho	ne Nun	mber				1			
					()								
SECTION 2. WATERCRAFT INFORMATION														
(Attach additional forms for multiple watercraft registrations.)														
Hull Identification Number (HIN) (please enter in spaces below) Registration Number														
Year Make Model Name and/or Number Length (feet and inches) Horsepower (if applications)												er (if applicable)		
Hull Material Boat Type Propulsion														
	☐ Aluminum	□Wood	☐ Runabout	☐ Airboa	at	drofoil	☐ Out	tboard		Auxiliary S	ail			
Check	Fiberglass	☐ Plastic	☐ Sailboat	☐ Comn	nercial	□ Нус	droplane	☐ Inb	oard		Water Jet			
Appropriate Box	☐ Steel	☐ Other	☐ Pontoon	☐ Cruise	er	☐ Jet	:-Ski	☐ Sai	il	☐ Manual ☐ C				
			☐ Houseboat	☐ Hover	rcraft Utility					Fuel				
			☐ Yacht	☐ Amph	nibious			Gasoline Di			sel	Other		
				_ '		_]]			
Application Fe	or (check one)													
	craft Registration		licate Watercraft	_	on		☐ Replac	cement V	Vaterc	raft Decals	5			
Purchase Date	(mm/dd/yyyy) (re	quired for new \	watercraft registr	ation)										
Description of	Watercraft Official	Business Usag	e											
'														
Situs Addres	ss (the address	where the wa	ntercraft is or w	ill be loca	ted upon	regis	tration)							
Street Address	(number and stre	eet)												
City					State	1	ZIP Code	. 1.	Count	.,	Town	ship		
City					IN		ZIF COUR	· [County	у	Towns	oriih		

SECTION 3. ENTI	TY CLASSIFICATION	
Please check one (1): 1. The State of Indiana a) a state agency,		
b) a state university, or		
c) other state entity 2. A municipal corporation (as defined in IC 36-1-2-10) "Municipal corporation" a) a county, city, town, or township,	ration" means any of the following:	
b) school corporation (Must be listed as a school corporation w	vith the Indiana Department of Education),	
c) library district (Must be listed as a library with the Indiana St	ate Library),	
d) local housing authority (Must provide a certified copy of the	ordinance(s) that establishes the authority),	
e) fire protection district (Must be listed with the Indiana State I	Fire Marshall or Indiana Department of Homeland Sec	:urity),
f) public transportation corporation (Must provide a certified co.	oy of the ordinance(s) that establishes the corporation	1),
g) local building authority (Must provide a certified copy of the r	esolution or ordinance(s) that establishes the authority	/),
h) local hospital authority or corporation (Must provide a certifie	d copy of the resolution or ordinance(s) that establish	es the authority),
i) local airport authority (Must provide a certified copy of the res	solution or ordinance(s) that establishes the authority)	,
j) special service district (Must provide a certified copy of the re	esolution or ordinance(s) that establishes the district),	
k) other separate local governmental entity that may sue and b that establishes the entity).	e sued (Must provide a certified copy of the statute, o	rdinance or resolution
3 A volunteer fire department (as defined in IC 36-8-12-2) (Mus Security and provide a copy of the contract or resolution to provide		
4 A volunteer emergency ambulance service that meets the re compensation or a nominal annual compensation of not mo Service with the Indiana Emergency Medical Services and provide	re than \$3,500.00. (Must be registered as a Voluntee	er Emergency Ambulance
5 A rehabilitation center funded under IC 12-12 (Must be listed letter from the Indiana Rehabilitation Bureau of the FSSA.)	as rehabilitation center with the Indiana Rehabilitation	Bureau and provide a
6 A community action agency (IC 12-14-23) (Must be designated	d by the Governor or under Federal law as a commun	ity action agency.)
7 An area agency of aging and the aged (IC 12-10-1-6) and a coprovide a copy of the contract with the Bureau of Aging and In-H		area agency (Must
8 A community mental health center (IC 12-29-2) (Must provide Indiana as a community mental health center.)	a copy of the Division of Mental Health and Addiction	's certificate to operate in
For Law Enforcement Watercraft (only available to these entities purs representative is employed with the entity.)	uant to IC 9-31-3-25): (Must provide official identifica	tion showing the
a) The Indiana State Police Department		
b) The Indiana Department of Natural Resources		
c) A county police department		
d) A city or town police department		
SECTION 4. AFFIRM	ATION AND SIGNATURE	
The authorized representative submitting this application swears or affirms uncorrect and that the entity for which this application is made owns or leases to 25.	nder penalty of perjury that the information provided in t	
Signature of Authorized Representative	Printed Name of Representative	Date (mm/dd/yyyy)
Title of Representative	Telephone Number of Representa	ative



Payment Information

Ì	Pay i	by:	Cre		ard (.	ey or Maste eck		rd or	Visa _,)													
		I here idicate			e the ow:	Indian	ıa Bur	eau o	of Mot	or V	'ehic	eles	to	cha	rge	the	crec	dit	cara	!			
	Т	уре с	of car	d:		Ma	sterC	ard		Vis	sa												
	Λ	lame	of ca	rdho	lder:																_		
		ссои																					
		tumb Expira																			_		
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Rou	ting I	Numb	per							Ac	ссоі	ınt .	Nu	ımb	er								