



STATE OF INDIANA

Eric J. Holcomb, Governor

Peter L. Lacy, Commissioner

Mini-Truck Title Application Checklist

Titles for mini-trucks being titled as a mini-truck for the first time in Indiana must be issued by the BMV Central Office. This includes mini-trucks that may be currently titled as some other type of vehicle (e.g. truck or off-road vehicle). If you own a mini-truck that is currently titled as any other type of vehicle, a new title must be issued that declares the vehicle as a mini-truck. Contact (888) 692-6841 with any questions.

When submitting paperwork, include the following:

- [Application for Certificate of Title for a Vehicle- State Form 205](#)
- Proof of ownership:
 - Mini-trucks purchased 1/1/2016 or after: A certificate of title or manufacturer's certificate of origin must be submitted for all mini-trucks purchased 1/1/2016 or after. If a certificate of title or certificate of origin cannot be provided, you must obtain a Court Order.
 - Mini-trucks purchased before 1/1/2016: In the event the current owner does not have a certificate of title or certificate of origin as an ownership document, submit a bill of sale (completed by the seller). In the event that a bill of sale is not available, complete the general Affidavit – State Form 37964 provided in this packet.
- [Physical Inspection of a Vehicle or Watercraft – State Form 39530](#). Required for vehicles purchased outside Indiana or when a certificate of title or certificate of origin is not submitted as the ownership document. If the vehicle does not have a vehicle identification number (VIN), you must include the [Request for Special Identification Number – MVIN Application Packet](#).
- [Odometer Disclosure Statement – State Form 43230](#)
- One side view picture of the entire vehicle.
- One proof of address. A driver's license or identification card may be accepted as proof if the address on the credential is correct. If the address is not correct, any document from the approved [BMV documentation list](#) that is dated within the last 60 days may be used as proof. To view the approved documentation list, click on the link provided or visit myBMV.com.
- Submit payment for the following vehicle title application fees and taxes. Payable by MasterCard or Visa, Check, electronic check, or money order.
 - \$15.00 title application fee.
 - \$30 additional administrative penalty will be assessed on a title application packet received 45 days after the purchase date.
 - \$25 speed title fee. This optional fee is in addition to the \$15 title application fee. Paying the optional speed title fee ensures that the title is processed in a period of time that is substantially shorter than the normal processing period.
 - If you are transferring ownership, include 7% sales tax of the purchase price or provide proof of sales tax paid on an [ST108 - Certificate of Gross Retail or Use Tax Paid – State Form 48842](#). If exempt from sales tax, include an [ST108E - Certificate of Gross Retail or Use Tax Exemption – State of Indiana Form 48841](#).
 - If no information is available to determine the purchase price, include a bill of sale or [State Form 56620 - Affidavit of Missing Title Information](#) with the purchase price listed or sales tax will be assessed based on the NADA fair market value of the vehicle or watercraft.
 - Vehicle color: _____ (List color online)
- Vehicle fuel type (select one):
 - Gasoline
 - Diesel
 - Hybrid
 - Electric
 - Other

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 Title Processing
100 North Senate Avenue, Room N411
Indianapolis, IN 46204**

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

Please include this checklist with your application.



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	
\$		\$		\$		\$						



BILL OF SALE

State Form 44237 (R4 / 7-17)
INDIANA BUREAU OF MOTOR VEHICLES

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

VEHICLE OR WATERCRAFT INFORMATION													
Vehicle or Hull Identification Number													
Year			Make				Model			Registration Number <i>(If applicable, watercraft only)</i>			
SALE INFORMATION													
Purchase Price							Date of Sale (mm/dd/yyyy)						
<p>I do hereby sell, transfer and convey all rights for the above vehicle / watercraft to the purchaser in consideration of the sale payment amount. I certify that the vehicle / watercraft is not subject to any liens that are the responsibility of the seller.</p> <p>I swear or affirm that the information I have entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.</p>													
Signature of Seller										Date (mm/dd/yyyy)			
Printed Name of Seller <i>(last, first, middle initial or company name)</i>													
Signature of Seller										Date (mm/dd/yyyy)			
Printed Name of Seller <i>(last, first, middle initial or company name)</i>													
Address of Seller <i>(number and street)</i>													
City						State				ZIP Code			
<p>I swear or affirm that the information entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.</p>													
Signature of Purchaser										Date (mm/dd/yyyy)			
Printed Name of Purchaser <i>(last, first, middle initial or company name)</i>													
Signature of Purchaser										Date (mm/dd/yyyy)			
Printed Name of Purchaser <i>(last, first, middle initial or company name)</i>													
Address of Purchaser <i>(number and street)</i>													
City						State				ZIP Code			



ODOMETER DISCLOSURE STATEMENT

State Form 43230 (R3 / 5-13)
INDIANA BUREAU OF MOTOR VEHICLES

- INSTRUCTIONS:**
1. In accordance with federal and state law, the seller of a motor vehicle must disclose the current mileage to a purchaser in writing upon transfer of ownership. The disclosure must be signed by the seller, including the printed name. If more than one person is a seller, only one seller is required to sign the written disclosure.
 2. The purchaser must sign the disclosure statement, including printed name and address, and return a copy to the seller.
 3. Complete this form in its entirety, in blue or black ink.

Federal and State law requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines, imprisonment, or both.

I, _____ residing at:

Printed name(s) of Seller(s)

certify to the best of my knowledge that the

Address of Seller(s) (number and street, city, state, and ZIP code)

odometer reading is the actual mileage of the vehicle described below unless one of the following statements is checked:

Miles (no tenths)

1. I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.
2. I hereby certify that the odometer reading is NOT the actual mileage and should not be relied upon. **WARNING - ODOMETER DISCREPANCY.**

Vehicle Make	Vehicle Model	Vehicle Year	Vehicle Body Type
Vehicle Identification Number (VIN)			Transfer Date (month, day, year)

I will not hold the Bureau of Motor Vehicles or the Bureau of Motor Vehicles Commission responsible for any discrepancy shown on the odometer reading. I, the undersigned, swear or affirm that the information entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.

Signature(s) of Seller(s)	Date (month, day, year)
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PURCHASER'S INFORMATION

I am aware of and acknowledge the above odometer certification made by the seller(s).

Signature(s) of Purchaser(s)	Date (month, day, year)	
Printed Name(s) of Purchaser(s)		
Address of Purchaser(s) (number and street)		
City	State	ZIP Code



AFFIDAVIT FOR NO PROOF OF OWNERSHIP OF A MINI-TRUCK

State Form 56621 (11-18)
Indiana Bureau of Motor Vehicles

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

SECTION 1: OWNER INFORMATION															
Name of Owner(s)															
Legal Address (<i>number and street</i>)								City			State		ZIP Code		
SECTION 2: VEHICLE INFORMATION															
Vehicle / Watercraft Identification Number (VIN / HIN):															
Year					Make					Model					
SECTION 3: OWNER AFFIRMATION															
A mini-truck, as defined in IC 9-13-2-103.1, is a motor vehicle that: <ol style="list-style-type: none">1. Is powered by an internal combustion engine with a piston or rotary displacement of not less than 660 cubic centimeters2. Is sixty (60) inches or less in width3. Has an unloaded dry weight of 1,600 pounds or less4. Can achieve a top speed of not more than sixty (60) miles per hour5. Is manufactured with a locking enclosed cab and a heated interior6. Is operated on a highway															
I legally own this mini-truck and there are no other claims of ownership.															
I agree 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 I have entered on this form is correct. I understand that making a false statement on this form may constitute the crime of perjury.															
Signature of Owner					Printed name					Date Signed (<i>mm/dd/yyyy</i>)					



PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R8 / 6-21)
INDIANA BUREAU OF MOTOR VEHICLES

BUREAU OF MOTOR VEHICLES
100 N. Senate Avenue, Room N440
Indianapolis, IN 46204
(888) 692-6841
www.bmv.in.gov

- 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 licensed under IC 9-32, a military policeman assigned to a military post in Indiana, a police officer, a designated employee of the BMV, an employee of a qualified person operating under a contract with the commission, or an employee of a dealer that is licensed as a motor vehicle dealer in a state other than Indiana and approved by the bureau.
 4. Police officers completing this form may charge a fee of not more than \$5.00 for this inspection under IC 9-17-2-12.

OWNER INFORMATION

Name (last, first, middle initial or company name)

Address (number and street)

City

State

ZIP Code

VEHICLE OR WATERCRAFT INFORMATION

Identification Number

NONE (Select if no identification number found.)

Year	Make	Model	Type	Plate Number / State	Watercraft Registration Number, if applicable												

For assembled vehicles or watercraft include serial numbers for major component parts if present:

Engine / Motor	Transmission
Body Chassis	Front Assembly
Rear Clip	Frame

Other (specify):

*IDACS / NCIC Check (Required if form is completed by a police officer)

Date Check Performed (mm/dd/yyyy)	Comments

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

Signature of Inspector	Printed Name	Title	Date (mm/dd/yyyy)	
Badge/ Branch/ Dealer Number	Police Department / Branch / Dealership	City	State	ZIP Code
Telephone Number ()	E-mail			



COLLECTION OF PAYMENT INFORMATION

State Form 56163 (R2 / 6-19)
INDIANA BUREAU OF MOTOR VEHICLES

BUREAU OF MOTOR VEHICLES

Central Office Finance
100 N. Senate Avenue, Room N440
Indianapolis, IN 46204
(888) 692-6841

- INSTRUCTIONS:**
1. Complete in blue or black ink, or print form.
 2. Enter the amount to be charged and the payment type information in Section 2. Payment may be made by Visa, MasterCard, Discover, American Express, or electronic check. If enclosing a check, money order, cashier's check, or certified check, this form is not required.
 3. Mail this form to the address that is specified on the application being submitted and for which you are making payment.
 4. This form will be destroyed immediately after payment has been processed.

SECTION 1 - ACCOUNT HOLDER INFORMATION				
Account Holder (first, middle, last name or company name)		Driver's License Number or Federal Identification Number		Telephone Number
Billing Address (number and street)			City	State ZIP Code
SECTION 2 - PAYMENT INFORMATION				
Amount to be Charged: \$ _____ . _____		Description of the service / application to which the payment is related		
CREDIT CARD PAYMENT				
Type of Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express				
Credit Card Number: _____ - _____ - _____ - _____			Expiration Date (mm/yy): ____ / ____	
ELECTRONIC CHECK PAYMENT				
Routing Number				
Account Number				
SECTION 3 - AFFIRMATION STATEMENT				
I hereby authorize the Indiana Bureau of Motor Vehicles to charge the account indicated above.				
Signature of Account Holder / Authorized User		Printed Name		Date Signed (mm/dd/yyyy)