



**COMMERCIAL VEHICLES – COVID 19 DELIVERIES**  
 Vehicle Title and/or Registration Application Checklist

This packet is intended for commercial vehicles requiring a certificate of title and/or registration for purposes of delivering relief in response to the Coronavirus under US Department of Transportation National Emergency Declaration only.

**Specify the type of application you are applying for:** *(check one)*

- Title only       Registration Only       Title and Registration

**Title Application Requirements**

- Completed and signed [Application for Certificate of Title for a Vehicle – State Form 205](#)
- Original certificate of title or manufacturer’s certificate of origin
- [Physical Inspection of a Vehicle or Watercraft – State Form 39530](#). Required for vehicles purchased outside of Indiana.
- [Odometer Disclosure Statement – State Form 43230](#) (only required if odometer statement is not completed on the certificate of title or certificate of origin). Trailers and vehicles over 16,000 pounds are exempt.
- [ST108E – Certificate of Gross Retail or Use Tax Exemption – State Form 48841](#) or;
- [ST108 – Certificate of Gross Retail or Use Tax Paid – State Form 48842](#)
- Vehicle color: \_\_\_\_\_ *(list color on line)*
- Vehicle fuel type: *(check one)*
  - Gasoline                       Diesel                       Other
  - Electric                           Hybrid

**Registration Application Requirements**

If you are applying for registration, please provide the following information:

- Copy of Indiana Certificate of Title or Application for Certificate of Title for a Vehicle – State Form 205 (only required if you are not also applying for title with this application)
- Copy of the lease agreement or [Statement of Existing Lease Agreement – State Form 12787](#) (if the vehicle is being leased from a leasing company)
- Are you requesting a new license plate or transferring a plate from another vehicle? *(check one)*
  - New Plate                       Transferring a Plate: Plate Number \_\_\_\_\_ *(required if transferring)*
- Would you like BMV to mail you a temporary license plate?       Yes    No *(check one)*
- Select vehicle type and registration weight for the vehicle you are registering:

Vehicle Type: <input type="checkbox"/> Truck <input type="checkbox"/> Farm Truck <input type="checkbox"/> Semitractor <input type="checkbox"/> Farm Semitractor  <i>(Farm plates are available on weights 16,000 and greater.)</i>	Declared Gross Vehicle Weight (“Registered Weight”): <input type="checkbox"/> 11,000 <input type="checkbox"/> 26,000 <input type="checkbox"/> 66,000 <input type="checkbox"/> 16,000 <input type="checkbox"/> 36,000 <input type="checkbox"/> 78,000 <input type="checkbox"/> 26,000 <input type="checkbox"/> 48,000 <input type="checkbox"/> > 78,000
<input type="checkbox"/> Trailer <input type="checkbox"/> Farm Trailer	<input type="checkbox"/> 12,000 <input type="checkbox"/> 22,000 <input type="checkbox"/> 16,000 <input type="checkbox"/> > 22,000
<input type="checkbox"/> Semitrailer <input type="checkbox"/> Farm Semitrailer	<i>(Semitrailer plates are not weighted)</i>

- Copy of your Form 2290 – Heavy Highway Vehicle Use Tax Return (only required for trucks and semitractors that have a GVW of 55,000 pounds or more – includes farm vehicles). A newly purchased vehicle is exempt from the Form 2290 requirement through the last day of the month following the month of purchase. A Form 2290 must be provided for any new registration application filed after that date.

**Payment**

- Complete and sign the Collection of Payment – State Form 56163 (provided in this packet)
- Title Fees:
  - Title Application Fee: \$15.00
  - Speed Title Fee: \$25.00 (in addition to the \$15.00 title application fee). A speed title ensures that the title is processed in a substantially shorter period of time than the normal processing period.
  - Seven percent (7%) sales tax, unless proof of sales tax paid or exemption is provided.
- Registration fees and taxes vary based on location, vehicle type, and registered weight.

Once the transaction is complete and payment has been processed, BMV will provide all transaction receipts and documents via email. Please provide the following contact information:

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Submitting Application Packet**

Please only submit one application per vehicle. Prior to submitting each application, verify all required information is included along with this checklist.

Applications may be submitted by visiting any BMV Full or Partial Service Provider location. Please note, a convenience fee may be charged for transactions processed at one of these locations. To find information and locations for BMV Full and Partial Service Providers, please visit <https://www.in.gov/bmv/2412.htm>.

Applications may also be mailed to one of the following BMV locations:

**Central Office Title Processing Center (CMV)**  
**100 N. Senate Ave. Room 411**  
**Indianapolis, IN 46204**

**Winchester Processing Center (CMV)**  
**P.O. Box 100**  
**Winchester, IN 47394**

If you would like for BMV to mail receipts and title application after processing, please include a self-addressed stamped or paid return envelope.

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



# APPLICATION FOR CERTIFICATE OF TITLE FOR A VEHICLE

State Form 205 (R11 / 3-20)

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-between; width: 100%;"> <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			
Electronic Lien and Title (ELT) identification number			Holder of First Lien, Mortgage, or Other Encumbrance / Special Mailing Address						
Mailing Address (number and street)			City		State	ZIP Code		BMV Use Only	
Electronic Lien and Title (ELT) identification number			Holder of Second Lien, Mortgage, or Other Encumbrance						
Mailing Address (number and street)			City		State	ZIP Code		BMV Use Only	
License Number				License Year		Forms Used			
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	
\$	\$	\$	\$						



# PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R7 / 4-19)

**BUREAU OF MOTOR VEHICLES**  
 100 N. Senate Avenue, Room N411  
 Indianapolis, IN 46204  
 (888) 692-6841  
[www.bmv.in.gov](http://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 a BMV license branch, or a designated employee of a BMV full or partial service provider.
  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. This fee is not collected by the Bureau of Motor Vehicles and should not be submitted with this form. The police officer completing this form will advise the Owner of the amount of the fee, if any, and the method by which it should be paid.

OWNER INFORMATION													
Name (last, first, middle initial or company name)													
Address (number and street)													
City											State		ZIP Code
VEHICLE OR WATERCRAFT INFORMATION													
Identification Number													<input type="checkbox"/> <b>NONE</b> (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			ZIP Code
Telephone Number (     )					E-mail Address								



# 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)

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

**certify to the best of my knowledge that the**

**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)

PURCHASER'S INFORMATION		
<b>I am aware of and acknowledge the above odometer certification made by the seller(s).</b>		
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



Form  
**ST-108E**  
State Form 48841  
(R4 / 3-08)

Indiana Department of Revenue  
**Certificate of Gross Retail or Use Tax**  
**EXEMPTION for the Purchase of a**  
**Motor Vehicle or Watercraft**

<b>NAME OF DEALER</b>	Dealer's RRMC # (Registered Retail Merchant Certificate Number)		
	_____	_____	_____
	TID# (10 digits)	LOC# ( 3 digits)	
Dealer's FID # (Federal Identification Number, 9 digits)	Dealer's License Number(seven digits)		

Address of Dealer	City	State	Zip Code
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<b>NAME OF PURCHASER(S) (PRINT OR TYPE)</b>	<b>SSN, TID, OR FID # (Mandatory)</b>
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Address of Purchaser	City	State	Zip Code
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**Vehicles Identification Information of Purchase**

VIN # (Vehicle Identification Number) or HIN # (Hull Identification Number)	Year	Make	Model/Length
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Calculation Of Purchase Price		Trade in Information		
1. Total Purchase Price .....	1.	VIN # (Vehicle Identification Number) or HIN # (Hull Identification Number)		
2. Trade-Allowance (Like-kind exchanges only).....	2.	Year	Make	Model/Length
3. Net Purchase Price (Line 1 minus Line 2) .....	3.			

**CALCULATION OF PURCHASE PRICE LINES 1, 2 & 3 MUST BE COMPLETED FOR ALL EXEMPTED PURCHASES**

**NEW RESIDENT STATEMENT** Must Be Completed if Exemption # 8 is claimed, see reverse side.  
I certify that I became a resident of INDIANA on (month & year)\_\_\_\_\_.

My previous State of Residence was\_\_\_\_\_. I hereby certify that the above statement is true 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 Indiana, Exemption # 15. See reverse side.

Date of Purchase \_\_\_\_\_

1. Purchase price of property subject to sales/use tax ..... 1. \$ \_\_\_\_\_

2. Indiana sales/use tax due: Multiply Line 1 by sales/use tax percentage (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 was the tax paid? \_\_\_\_\_

4. Total amount due: Subtract Line 3 from Line 2. .... 4. \$ \_\_\_\_\_  
(Line # 3 can not exceed Line # 2)

**DIRECT RELATIVE IDENTIFICATION EXEMPTION** (Must Be Completed if Exemption # 11 is claimed, see reverse side).

Name(s) on original title\_\_\_\_\_ Relationship of above parties\_\_\_\_\_

Name(s) being added/deleted \_\_\_\_\_

**PUBLIC TRANSPORTATION EXEMPTION** (Must be completed if exemption # 6 is claimed and you are not a school bus operator.)

USDOT # (U.S. Department of Transportation Number) \_\_\_\_\_

I certify that the above vehicle or watercraft is exempt from sales/use tax under exemption # \_\_\_\_\_(see reverse side). I also certify that any sales tax credit shown as paid to an out of state dealer using exemption #15 was actually collected by the dealer and the dealer has not provided the buyer with a check to be paid to the BMV. I understand that making a false statement on this form may constitute the crime of perjury.

Date\_\_\_\_\_ Signature of Purchaser \_\_\_\_\_

## 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 new motor vehicles purchased for which they possess a manufacturer's franchise to sell that particular vehicle. If a dealer does not possess a manufacturer's franchise to sell the new vehicle purchased the dealer must pay sales tax and the resale exemption is invalid. (I.C. 6-2.5-5-8)**
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.**



# 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
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#### 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)