



STATE OF INDIANA

Eric J. Holcomb, Governor

Peter L. Lacy, Commissioner

WATERCRAFT USED FOR OFFICIAL BUSINESS Watercraft Title and Registration Application Checklist

Title and registration applications for watercraft owned or leased and used for official business 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 Application Requirements

- [Application for Certificate of Watercraft Title – State Form 38529](#)
- Original certificate of title or manufacturer's certificate of origin
- [Physical Inspection of a Vehicle or Watercraft – State Form 39530](#). 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.

Registration Application Requirements

- [Application for Registration of Watercraft Used for Official Business – 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. **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 WATERCRAFT TITLE

State Form 38529 (R9 / 03-20)
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 watercraft 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.			
Hull Identification Number				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	Registration Number	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: _____			
				Printed Name: _____			
				Date (mm/dd/yyyy): _____			
Transaction Number		Branch Number	Invoice Number	BMV Use Only			
Registration Number		Former Title Number		Purchase Date (mm/dd/yyyy)	Make		
Series or Model		Hull Identification Number		Length	Year	Hull Type	
Watercraft Type		Watercraft Use		Propulsion Type		Fuel Type	
Social Security Number / Federal Identification Number *			Horsepower	Applicant's County of Residence			
Name of Applicant				Street Address (number and street)			
City				State		ZIP Code	
ELT ID	Holder of First Lien, Mortgage, or Other Encumbrance / Special Mailing Address			Mailing Address (number and street)			
City			State	ZIP Code		BMV Use Only	
ELT ID	Holder of Second Lien, Mortgage, or Other Encumbrance			Mailing Address (number and street)			
City			State	ZIP Code		Dealer Number	
Gross Retail and Use Tax Affidavit – I/We hereby certify that sales or use tax on this watercraft 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 (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
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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			



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)						
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.													
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.													
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			
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.													
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			



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**

NAME OF DEALER		Dealer's RRMC # (Registered Retail Merchant Certificate Number) <table style="width: 100%; border: none;"><tr><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td><td style="border: 1px solid black; width: 20px; height: 20px;"></td></tr></table>																
Dealer's FID # (Federal Identification Number, 9 digits)		Dealer's License Number(seven 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															
Vehicles Identification Information of Purchase																		
VIN # (Vehicle Identification Number) or HIN # (Hull Identification Number)	Year	Make	Model/Length															
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	Model/Length															
3. Net Purchase Price (Line 1 minus Line 2).....	3.	Make																
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.



APPLICATION FOR REGISTRATION OF WATERCRAFT USED FOR OFFICIAL BUSINESS

State Form 35913 (R11 / 6-18)
Indiana Bureau of Motor Vehicles

BUREAU OF MOTOR VEHICLES
Municipal Processing
100 North Senate Avenue
Room N415
Indianapolis, IN 46204

- INSTRUCTIONS:**
1. Complete in blue or black ink, or print form.
 2. Complete all information in sections 1, 2, 3, and 4, as applicable, and mail to the address listed above.
 3. 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 Owner							Federal Identification Number				
Street Address of Entity (number and street)											
City					State IN	ZIP Code		County		Township	
Mailing Address (if different from street address)					City			State IN	ZIP Code		
Name and Title of Entity's Executive Officer					Telephone Number ()						
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 applicable)		
Check Appropriate Box	Hull Material		Boat Type					Propulsion			
	<input type="checkbox"/> Aluminum	<input type="checkbox"/> Wood	<input type="checkbox"/> Runabout	<input type="checkbox"/> Airboat	<input type="checkbox"/> Hydrofoil	<input type="checkbox"/> Outboard	<input type="checkbox"/> Auxiliary Sail				
	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Plastic	<input type="checkbox"/> Sailboat	<input type="checkbox"/> Commercial	<input type="checkbox"/> Hydroplane	<input type="checkbox"/> Inboard	<input type="checkbox"/> Water Jet				
	<input type="checkbox"/> Steel	<input type="checkbox"/> Other	<input type="checkbox"/> Pontoon	<input type="checkbox"/> Cruiser	<input type="checkbox"/> Jet-Ski	<input type="checkbox"/> Sail	<input type="checkbox"/> Manual	<input type="checkbox"/> Other			
		<input type="checkbox"/> Houseboat	<input type="checkbox"/> Hovercraft	<input type="checkbox"/> Utility	Fuel						
		<input type="checkbox"/> Yacht	<input type="checkbox"/> Amphibious	<input type="checkbox"/> Other	Gasoline		Diesel		Other		
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Application For (check one)											
<input type="checkbox"/> New Watercraft Registration			<input type="checkbox"/> Duplicate Watercraft Registration				<input type="checkbox"/> Replacement Watercraft Decals				
Purchase Date (mm/dd/yyyy) (required for new watercraft registration)											
Description of Watercraft Official Business Usage											
Situs Address (the address where the watercraft is or will be located upon registration)											
Street Address (number and street)											
City					State IN	ZIP Code		County		Township	

SECTION 3. ENTITY CLASSIFICATION

Please check one (1):

1. The State of Indiana (as defined in IC 6-1.1-1-18)

- 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" means any of the following:

- a) a county, municipality, or township,
- b) school corporation *(Must be listed as a school corporation with the Indiana Department of Education),*
- c) library district *(Must be listed as a library with the Indiana State 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 Fire Marshall or Indiana Department of Homeland Security),*
- f) public transportation corporation *(Must provide a certified copy of the ordinance(s) that establishes the corporation),*
- g) local building authority *(Must provide a certified copy of the resolution or ordinance(s) that establishes the authority),*
- h) local hospital authority or corporation *(Must provide a certified copy of the resolution or ordinance(s) that establishes the authority),*
- i) local airport authority *(Must provide a certified copy of the resolution or ordinance(s) that establishes the authority),*
- j) special service district *(Must provide a certified copy of the resolution or ordinance(s) that establishes the district),*
- k) other separate local governmental entity that may sue and be sued *(Must provide a certified copy of the statute, ordinance or resolution that establishes the entity).*

3. A volunteer fire department (as defined in IC 36-8-12-2) (Must be listed with the Indiana State Fire Marshall or Department of Homeland Security and provide a copy of the contract or resolution to provide firefighting services for a county, city, town, or township.)

4. A volunteer emergency ambulance service that meets the requirements of IC 16-31 and has only members that serve for no compensation or a nominal annual compensation of not more than \$3,500.00. (Must be registered as a Volunteer Emergency Ambulance Service with the Indiana Emergency Medical Services and provide an official letter from the Indiana Emergency Medical Services Commission.)

For Law Enforcement Watercraft: (Must provide official identification showing the representative is employed with the law enforcement agency.)

- 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. AFFIRMATION AND SIGNATURE

The authorized representative submitting this application swears or affirms under penalty of perjury that the information provided in this application is true and correct and that the entity for which this application is made owns or leases the above listed watercraft and uses it for official business pursuant to IC 9-31-3-25.

Signature of Authorized Representative		Printed Name of Representative	Date (mm/dd/yyyy)
Title of Representative		Telephone Number of Representative ()	



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)