

Indiana Government Center South  
 Division of Fire & Building Safety  
 Indiana Department of Homeland Security  
 302 W. Washington Street, Room E241  
 Indianapolis, IN 46204  
 (317) 232-1921



**REQUEST FOR FIRST INSPECTION**

**Assignment of Indiana Registration**

Date of Request:	Name of Insuring Agency:
Name of Authorized Inspector:	
Address where this form is returned:	
Owners Name:	
Owners Mailing Address:	
Location Name:	
Location Address:	
Contact Name:	Contact phone number:

**Regulated Vessel Information:**

Type of Object	Manufacturer	Serial or NB #	Indiana Reg. #	Cert. Exp. Date	Year Built	Loc. in Plant

This request for 'First Inspection Form' **cannot** be used to Notify the BPV Division of New, Canceled, or Suspended Insurance risks, as referenced in 680 IAC 2-3-13. A separate form or forms must be completed to serve as that notification, and a specific Indiana registration number must be referenced for each vessel listed on that separate form. Notification as required in 680 IAC 2-3-13 cannot be accepted unless it specifically references the Indiana registration number for each vessel it is intended to reference.

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