SALVAGE MOTOR VEHICLE RESTORATION
Title Application Checklist

To request a rebuilt title brand for a vehicle previously branded as salvage, you must apply for a salvage restoration title.

Salvage restoration title applications are processed by the BMV Central Office. Prior to submitting each application, verify that all required information is included. Contact (888) 692-6841 with any questions.

When submitting paperwork, include the following:

☐ Application for Certificate of Title for a Vehicle – State Form 205

☐ The certificate of salvage title

☐ If vehicle is transferring ownership, the odometer statement must be completed on certificate of salvage title or a completed Odometer Disclosure Statement – State Form 43230 must be submitted.

☐ Affidavit of Restoration for a Salvage Motor Vehicle – State Form 44606

☐ Proof of ownership and/or proof of purchase is required for each major component part used during restoration. If restoration was completed by using parts on hand, complete a general Affidavit – State Form 37964 and include the vehicle information (year, make, and VIN) and each part used (including serial number, if applicable).

☐ 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 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 title application fee.
  ☐ $30 additional administrative penalty will be assessed if the title application packet is not received within 45 days after the vehicle was purchased or otherwise acquired.
  ☐ $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 vehicle is 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 46842. If ownership is being maintained, or if exempt from sales tax, include an ST108E – Certificate of Gross Retail or Use Tax Exemption – State Form 48841.

☐ Vehicle color: __________________________ (List color on line)

☐ 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 (R9 / 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 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.

<table>
<thead>
<tr>
<th>Vehicle Identification Number</th>
<th>Year</th>
<th>Make</th>
<th>Model</th>
<th>Type</th>
<th>Date (mm/dd/yyyy)</th>
</tr>
</thead>
</table>

Inspector's Printed Name and Title  
City

Inspector's Signature  
Badge, Branch, or Dealer Plate Number

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/yyyy)  
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  
BMV Use Only

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.

<table>
<thead>
<tr>
<th>Selling Price</th>
<th>Less Trade-In / Discount</th>
<th>Amount Subject to Tax</th>
<th>Amount of Tax</th>
<th>Dealer</th>
<th>Branch</th>
<th>Exempt</th>
<th>Exemption Code</th>
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**INSTRUCTIONS:** Use the following instructions to assist with completion of the application.

Sign and date on top right signature line.

Line 1: BMV use only

Line 2: Enter the name(s) and Social Security Number or Federal Identification Number of the owner(s).

Line 3: Enter the residence address of the owner(s).

Line 4: Enter the VIN, Year, Make, Model, Odometer (if applicable), and Vehicle Type (examples include: 2S (2 door sedan), 4S (4 door sedan), CN (convertible), CP (coupe), 2W (2 door wagon), 4W (4 door wagon), VA (van), TK (truck), MC (motorcycle), TR (trailer), SE (semitrailer), TC (semi tractor), RV (recreational vehicle, including motor home and travel trailer), MH (manufactured/mobile home), AT (all-terrain), and LS (low speed).

Line 5: Enter former title number and purchase date, and indicate if there is a lien by entering Y (yes) or N (no). If a speed title is requested, enter Y (yes) and include an additional $25 with the application.

Line 6 - 9: Indicate lienholder name(s) and mailing address. If there is no lien, and you wish to have the title mailed to an address other than your current mailing address, enter a special mailing address on lines 6 and 7. Enter dealer license information (if applicable).

Line 10: Not required to be completed. However, appropriate tax form or payment must be included with the title application.
# AFFIDAVIT OF RESTORATION FOR A SALVAGE MOTOR VEHICLE

**INSTRUCTIONS:**
1. Complete in blue or black ink or print form.
2. Certificate of salvage title must be submitted. The title may be assigned to a purchaser. Out of state titles are accepted.
3. Proof of ownership and the source of major component parts used are required.
4. Vehicles designated as "junk," "non-repairable," "scrap," or similar designation may not be titled in Indiana.

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## OWNER INFORMATION

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

Address (number and street)

City

State

ZIP Code

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## RESTORER INFORMATION

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

Address (number and street)

City

State

ZIP Code

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## VEHICLE INFORMATION

Vehicle Identification Number

Year

Make

Model

Body Type

Purchase Date (mm/dd/yyyy)

Purchase Price

$-

## MAJOR COMPONENT PARTS

Includes parts of motor vehicles, motorcycles, semitrailers, or recreational vehicles normally having a manufacturer's vehicle identification number, a derivative of the identification number, or a number supplied by an authorized governmental agency, including doors, fenders, differentials, frames, transmissions, engines, doghouses (front assembly), rear clips, etc. Proof of ownership/purchase for each item must be submitted with application. Attach additional pages if necessary.

<table>
<thead>
<tr>
<th>Name of Part</th>
<th>Source VIN or Serial Number</th>
<th>Name and Address of Source</th>
<th>Date Acquired (mm/dd/yyyy)</th>
<th>Cost of Part</th>
</tr>
</thead>
<tbody>
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## RESTORATION STATEMENT

I certify that all major component parts incorporated during the restoration of the above vehicle have been included with this application. The restoration of the above vehicle is complete. To my knowledge, no stolen parts were utilized in the restoration process. 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. I hereby request the Bureau of Motor Vehicles to issue a certificate of title with a "Rebuilt" brand for this motor vehicle.

Signature of Restorer

Printed Name

Date (mm/dd/yyyy)

Signature of Owner (if different from restorer)

Printed Name

Date (mm/dd/yyyy)

## PHYSICAL INSPECTION BY AN INDIANA POLICE OFFICER

I hereby certify that I am a law enforcement officer of the state of Indiana and I have personally examined the above vehicle, major component parts and ownership documents. The salvage restoration conforms to Indiana Code §9-22-3. I understand making a false statement may constitute the crime of perjury.

IDACS/NCIC Check Required. Date Performed (mm/dd/yyyy)

Comments

Signature of Officer

Printed Name

Title

Badge Number

Police Department

City

State

IN

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)
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:

<table>
<thead>
<tr>
<th>Miles (no tenths)</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ 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.</td>
</tr>
<tr>
<td>☐ 2. I hereby certify that the odometer reading is NOT the actual mileage and should not be relied upon. WARNING - ODOMETER DISCREPANCY.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Vehicle Make</th>
<th>Vehicle Model</th>
<th>Vehicle Year</th>
<th>Vehicle Body Type</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Vehicle Identification Number (VIN)</th>
<th>Transfer Date (month, day, year)</th>
</tr>
</thead>
</table>

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

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

STATE OF INDIANA
COUNTY OF

Name

Address (number and street, city, state, ZIP code)

Deposes and says upon his or her oath that:

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

Date (month, day, year)
**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, 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

<table>
<thead>
<tr>
<th>Name of Account Holder (first, middle, last, or company name)</th>
<th>Driver's License Number (DLN) or Federal Identification Number</th>
<th>Telephone Number</th>
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<table>
<thead>
<tr>
<th>Billing Address (number and street)</th>
<th>City</th>
<th>State</th>
<th>ZIP Code</th>
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<tbody>
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</table>

### SECTION 2 - PAYMENT INFORMATION

<table>
<thead>
<tr>
<th>Amount to be Charged: $___________ . _____</th>
</tr>
</thead>
</table>

Description of the service/application to which the payment is related:

**Credit Card Payment:**

<table>
<thead>
<tr>
<th>Type of Credit Card:</th>
<th>☐ Visa</th>
<th>☐ MasterCard</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Credit Card Number: __________ - __________ - __________ - __________</th>
<th>Expiration Date (mm/yy): _____ / _____</th>
</tr>
</thead>
</table>

**Electronic Check Payment:**

<table>
<thead>
<tr>
<th>Routing Number:</th>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Account Number:</th>
</tr>
</thead>
</table>

### SECTION 4 - AFFIRMATION STATEMENT

I hereby authorize the Indiana Bureau of Motor Vehicles to charge the credit card or the electronic check information in the amount provided above.

<table>
<thead>
<tr>
<th>Signature of Account Holder / Authorized User</th>
<th>Printed Name</th>
<th>Date Signed (mm/dd/yyyy)</th>
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