



# STATE OF INDIANA

Michael R. Pence, Governor

Donald M. Snemis, Commissioner

## REQUEST FOR SPECIAL IDENTIFICATION NUMBER (HIN) APPLICATION CHECKLIST

Special Identification Number applications for a watercraft are processed by BMV Central Office Title Processing to improve the security and efficiency of these transactions. Prior to submitting each application verify all required information is included. Contact (888) 692-6841 with any questions.

When submitting paperwork, include the following:

- Completed and signed Application for Special Identification Number – State Form 12907
- Proof of Ownership. Examples include: Certificate of Title, Certificate of Origin, Bill of Sale, etc. If no proof of ownership, submit the Watercraft Ownership Affidavit – State Form 55100.
- Physical Inspection of a Vehicle or Watercraft – State Form 39530. Must be completed by a law enforcement officer.
- One original side view, color picture of the entire watercraft.
- \$10.50 for hull identification number (HIN) application. Payable by credit card (MasterCard or Visa), check, electronic check, or money order.

For your convenience, the required forms are included with this checklist. The forms are also available at myBMV.com. Mail the completed packet to:

**Central Office Title Processing  
100 North Senate Avenue, Room N417  
Indianapolis, IN 46204**

**Note: Include this checklist on the top of your application with contact information provided below. If all required documents are not submitted or information is incomplete the entire application will be returned.**

Print Name \_\_\_\_\_

Phone Number \_\_\_\_\_ Email (optional) \_\_\_\_\_



# APPLICATION FOR SPECIAL IDENTIFICATION NUMBER – MOTOR VEHICLE OR WATERCRAFT

State Form 12907 (R5 / 10-12)  
INDIANA BUREAU OF MOTOR VEHICLES

**BUREAU OF MOTOR VEHICLES**  
100 North Senate Avenue, N417  
Indianapolis, IN 46204

- INSTRUCTIONS:**
1. Complete in blue or black ink or print form.
  2. Proof of ownership for vehicle or watercraft and/or parts must be submitted with the application.
  3. VIN inspection, State Form 39530, must be completed by a law enforcement officer and submitted with the application.
  4. Include a side view, color photograph of the entire vehicle or watercraft. For manufactured homes a photograph of the front and back of the home is required.

## APPLICANT INFORMATION

|  |      |   |          |
|--|------|---|----------|
| Name (last, first, middle initial or company name) |      | Driver's License or Federal Identification Number |          |
| Address (number and street)                        | City | State   | ZIP Code |

## VEHICLE OR WATERCRAFT INFORMATION

|  |  |  |  |  |  |  |  |  |  |                                |      |       |
|--|--|--|--|--|--|--|--|--|--|--------------------------------|------|-------|
| Original Identification Number (include any numbers that remain or "none") |  |  |  |  |  |  |  |  |  | Year                           | Make | Model |
| Vehicle or Watercraft Type   |  |  | License Plate or Watercraft Registration Number (if known) |  |  |  |  |  |  | Length (for watercraft, ft/in) |      |       |

### From whom purchased (if applicable):

|                             |      |       |          |
|-----------------------------|------|-------|----------|
| Name                        |      |       |          |
| Address (number and street) | City | State | ZIP Code |

### Reason for request:

|   |   |
|---|---|
| <input type="checkbox"/> Identification Number not installed      | Explain reason not installed                            |
| <input type="checkbox"/> Identification Number altered or defaced | Explain cause of alteration or defacement               |
| <input type="checkbox"/> Privately Assembled Motor Vehicle        | <input type="checkbox"/> Privately Assembled Watercraft |

## PRIVATELY ASSEMBLED VEHICLE OR WATERCRAFT

Check the major component parts used to assemble vehicle or watercraft.

|                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Engine/Motor | <input type="checkbox"/> Transmission   |
| <input type="checkbox"/> Body Chassis | <input type="checkbox"/> Front Assembly |
| <input type="checkbox"/> Rear Clip    | <input type="checkbox"/> Frame          |

Other (please specify):

This application is submitted to request the Bureau of Motor Vehicles to issue a special identification number to the vehicle or watercraft described above. I certify that the above vehicle or watercraft conforms to applicable state and federal equipment and safety standards.

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

|           |              |                          |
|-----------|--------------|--------------------------|
| Signature | Printed Name | Date Signed (mm/dd/yyyy) |
|-----------|--------------|--------------------------|



# WATERCRAFT OWNERSHIP AFFIDAVIT

State Form 55100 (9-12)  
Indiana Bureau of Motor Vehicles

- INSTRUCTIONS:**
1. Complete in blue or black ink or print form.
  2. An applicant who is unable to present ownership documentation for a watercraft due to one of the reasons listed below may present this form to obtain a certificate of title and/or certificate of registration.
  3. All applicants claiming ownership must sign this affidavit.

| OWNER INFORMATION  |      |       |          |
|--|------|-------|----------|
| Owner's Name (last, first, middle initial or company name) |      |       |          |
| Owner's Legal Address (number and street)                  | City | State | ZIP Code |
| Owner's Name (last, first, middle initial or company name) |      |       |          |
| Owner's Legal Address (number and street)                  | City | State | ZIP Code |

| WATERCRAFT INFORMATION |  |  |  |  |  |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|--|--|--|--|--|
|------------------------|--|--|--|--|--|--|--|--|--|--|--|

|  |  |  |  |  |  |  |  |  |  |      |  |      |
|--|--|--|--|--|--|--|--|--|--|------|--|------|
| Hull Identification Number (HIN): (please enter in spaces below) |  |  |  |  |  |  |  |  |  | Make |  | Year |
|  |  |  |  |  |  |  |  |  |  |      |  |      |

|                          |                          |            |
|--------------------------|--------------------------|------------|
| Model Name and/or Number | Length (feet and inches) | Horsepower |
|--------------------------|--------------------------|------------|

|                                      |  |  |  |                          |                          |              |
|--------------------------------------|--|--|--|--------------------------|--------------------------|--------------|
| <b>Check<br/>Appropriate<br/>Box</b> | <b>Hull Material</b>   | <b>Boat Type</b>   | <b>Propulsion</b>  |                          |                          |              |
|                                      | <input type="checkbox"/> Aluminum <input type="checkbox"/> Wood<br><input type="checkbox"/> Fiberglass <input type="checkbox"/> Plastic<br><input type="checkbox"/> Steel <input type="checkbox"/> Other | <input type="checkbox"/> Runabout <input type="checkbox"/> Airboat <input type="checkbox"/> Hydrofoil<br><input type="checkbox"/> Sailboat <input type="checkbox"/> Commercial <input type="checkbox"/> Hydroplane<br><input type="checkbox"/> Pontoon <input type="checkbox"/> Cruiser <input type="checkbox"/> Jet-Ski<br><input type="checkbox"/> Houseboat <input type="checkbox"/> Hovercraft <input type="checkbox"/> Utility<br><input type="checkbox"/> Yacht <input type="checkbox"/> Amphibious <input type="checkbox"/> Other | <input type="checkbox"/> Outboard <input type="checkbox"/> Auxiliary Sail<br><input type="checkbox"/> Inboard <input type="checkbox"/> Water Jet<br><input type="checkbox"/> Sail <input type="checkbox"/> Manual <input type="checkbox"/> Other |                          |                          |              |
|                                      | <b>Fuel</b>  |  |  | <b>Gasoline</b>          | <b>Diesel</b>            | <b>Other</b> |
|                                      |  |  | <input type="checkbox"/>   | <input type="checkbox"/> | <input type="checkbox"/> |              |

|                                   |                                  |                                 |   |                                     |  |
|-----------------------------------|----------------------------------|---------------------------------|---|-------------------------------------|--|
| <b>Watercraft Use</b>             |                                  |                                 |   |                                     |  |
| <input type="checkbox"/> Pleasure | <input type="checkbox"/> Fishing | <input type="checkbox"/> Livery | <input type="checkbox"/> Passenger for Hire | <input type="checkbox"/> Commercial |  |

|   |   |  |
|---|---|--|
| <b>Check<br/>Appropriate<br/>Reason</b> | <input type="checkbox"/> Watercraft Valued at Less Than \$3,000 When New<br><input type="checkbox"/> Watercraft Purchased Prior to January 1, 1986<br><input type="checkbox"/> Privately Assembled Watercraft | Date of Purchase or Date of Assembly (mm/dd/yyyy)          |
|   |   | Purchase Price<br>\$                                       |
|   |   | Estimated Value When New (required for registration)<br>\$ |

| AFFIRMATION AND SIGNATURE |  |  |
|---------------------------|--|--|
|---------------------------|--|--|

This affidavit is submitted to request the Indiana Bureau of Motor Vehicles issue an Indiana Certificate of Title and/or Certificate of Registration. I agree to indemnify and hold harmless the Indiana Bureau of Motor Vehicles from any liability arising from this transaction. I understand that making a false statement may constitute the crime of perjury.

|                       |                    |                          |
|-----------------------|--------------------|--------------------------|
| Printed Name of Owner | Signature of Owner | Date Signed (mm/dd/yyyy) |
| Printed Name of Owner | Signature of Owner | Date Signed (mm/dd/yyyy) |

| BMV USE ONLY |  |
|--------------|--|
|--------------|--|

|          |                             |
|----------|-----------------------------|
| Visit ID | Date Processed (mm/dd/yyyy) |
|----------|-----------------------------|



# PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R5 / 12-11)  
 Approved by State Board of Accounts, 2011  
 INDIANA BUREAU OF MOTOR VEHICLES

- 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 designated by the Indiana Secretary of State, a military policeman assigned to a military post in Indiana, a police officer, or a designated employee of a BMV full or partial service license branch.
  4. Police officers completing this form may not charge a fee of more than \$5.00 for vehicles. No fee may be collected for watercraft inspections. Authorized Indiana dealers and BMV full or partial service license branches may not assess a fee.
  5. Dealers may not perform watercraft inspections.

## 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  | ZIP Code          |
| Telephone Number<br>(     )    | Email Address                           |       |                   |



## *Payment Information*

*Pay by:*

- Check or money order*
- Credit Card (MasterCard or Visa)*
- Electronic check*

*I hereby authorize the Indiana Bureau of Motor Vehicles to charge the credit card indicated below:*

*Type of card:*       *MasterCard*     *Visa*

*Name of cardholder:* \_\_\_\_\_

*Account*

*Number:* \_\_\_\_\_

*Expiration*

*Date:* \_\_\_\_\_

*I hereby authorize the Indiana Bureau of Motor Vehicles to charge the checking account indicated below:*

| <i>Routing Number</i>  | <i>Account Number</i> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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