STATE OF INDIANA )	INWellsCIRCUIT/SUPERIOR COURT SS:
COUNTY OFWells )	33.
IN THE MATTER OF: VEHICLE TITLE REQUEST FOR (Insert year, make and model) VIN #	), CASE NO
VERIFIED REQUEST FOR COURT OR	DER FOR VEHICLE TITLE
Comes now the Petitioner Indiana Bureau of Motor Vehicles t states, under oath, that the followi	and requests that the Court issue an order to the to issue a title for the following vehicle and in support of said requesting is true:
Petitioner's Address: County of Residence: Social Security Number:	
2. Description of Vehicle: Type of Vehicle: Manufacturer: Make/Model: Year: Estimated value: VIN Number:	
4. State the name, address, and all on the current title	
5. Describe the circumstances how	you acquired or came into possession of the vehicle:
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6. Describe the efforts you made and why you cannot obtain a title for the vehicle:
7. Please attach any written documents including bills of sale, titles, police checks, etc.
8. Any other information you want the Court to consider (If you need more space you may use the back of the form):
I affirm under the penalties for perjury that the foregoing representations are true.  Dated:
Petitioner's Signature
Printed

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## PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R6 / 11-17)

BUREAU OF MOTOR VEHICLES 100 N. Senate Avenue, Room N440 Indianapolis, IN 46204 (888) 692-6841

www.bmv.ln.gov

INSTRUCTIONS:

1. Approved inspector must complete information in blue or black ink or print form.

 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.

 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.

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.

Name (i	last, first	middle Initial	or compar	ny name	) 		OWNE	RINFOR	MATIO	Ú.						1965 - Mickey A	
Address	(numbe	er and street)		<u>.</u>	······································		Α						***************************************				
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Identific	ation Nu	mber									NONE (	Select if	no iden	tification' i	number four	nd.)	
		,						,									
Year		Make			Model		Ту	ре	Plate Number / State				Watercraft Registration Number, if applicable				
For as	sembl	ed vehicle	s or wa	tercra	ift include	serial n	umbers	for ma	jor comi	ponent i	arts if i	present	en in the				
Englne /	Motor	***						Tra	nsmission						,		
Body Chassis Front Assembly																	
Rear Clip							Frame										
Other (sp	ecify):												<del>//</del>				
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Date Che	ak Perfa	med (mm/do	(/yyyy)	Comm	ents												
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Signature						Printed	Name				Title				Date (mm/d	dd/yyyy)	
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(	)																

STATE OF INDIANA ) INWELLSCIRCUIT/SUPERIOR COURT
COUNTY OF _WELLS )
IN THE MATTER OF:  VEHICLE TITLE REQUEST  FOR (Insert year, make and model),  VIN #  )
ORDER
Comes now and requests that the Court issue an order for one (Insert year, make and model of vehicle), VIN # The Court being duly advised and having considered the evidence now finds that is the owner of one (Insert year, make and model of vehicle), VIN #, and that the Indiana Bureau of Motor Vehicles should issue a title to for said motor vehicle.
IT IS THEREFORE ORDERED, ADJUDGED AND DECREED by the Court thatis the owner of one (Insert year, make and model of vehicle), VIN #, and that the Indiana Bureau of Motor Vehicles issue a title tofor said motor vehicle. Dated this day of, 20
Judge
Distribution: