

## **INSTRUCTIONS FOR REQUESTING AN ORDER REQUIRING THE INDIANA BUREAU OF MOTOR VEHICLES TO ISSUE A TITLE**

### **Step One**

Schedule an appointment to have the vehicle inspected and certified as not reported as stolen. The certification will need to be completed on State Form 39530.

### **Step Two**

Complete the two (2) page Verified Request for an Order Requiring the Indiana Bureau of Motor Vehicles to Issue a Title (“Petition”) and file the documents listed below with the Vanderburgh County Clerk’s Office. You must also pay the filing fee at this time. The following documents should be filed with the Clerk at this Step:

- ☐ Petition
- ☐ Affidavit of Police Officer Physical Inspection (State Form 39530)
- ☐ Valid bill of sale, if available
- ☐ Any other documents or correspondence demonstrating the transfer of ownership if no bill of sale is available
- ☐ Documentation regarding the estimated value of the vehicle such as a printout from Kelly Blue Book, Edmunds, or similar documentation. If the bill of sale includes the sale price, you do not need to provide additional documentation regarding value.

If the vehicle is valued at \$10,000.00 or less, the case will be filed in small claims court. The Clerk’s office will set a hearing date in small claims court.

If the vehicle is valued at more than \$10,000.00, the case will be assigned a MI cause number and assigned to one of the Vanderburgh Superior Court judges. The judge’s office will provide a hearing date.

### **Step Three**

If you purchased the vehicle in Indiana or from an Indiana resident, fill out Indiana State Form 53789 as completely as possible. On the form, you will select “Certified Vehicle/Watercraft Title Inquiry” for the current owner and “Pending litigation” on the checkboxes in steps 3 and 4. You will need to provide the cause number for the case you filed in Step One. You may do this by including a copy of the Petition with the form. Mail the completed form, Petition, and required fee to:

Indiana Bureau of Motor Vehicles  
Attn: Records Request  
100 N. Senate Avenue, Room N412  
Indianapolis, IN 46204

You should receive your report back from the BMV in approximately two to four weeks. This report will provide you with the identity and contact information for the current title owner of the vehicle. **You must bring a copy of this report to the scheduled hearing.**

NOTE: If you purchased the vehicle in another state, you should file your request in that state or request information from that state's bureau or department of motor vehicles to determine the current title owner and provide that information to the Court.

#### **Step Four**

**If you have a valid bill of sale showing the current title owner sold you the vehicle, you may skip this step.** Otherwise, you must serve the copy of the Petition and a Summons and Notice of Hearing to the current title owner as identified on the BMV report via Certified Mail or Sheriff's Service. Service should be attempted at least six weeks prior to the scheduled hearing date.

#### **Step Five**

Bring all relevant documents to your Court hearing. **Failure to follow all steps and provide all documentation by the date of your hearing and/or failure to appear for your hearing may result in your case being dismissed.**

#### **Step Six**

If the Court grants your petition, you will receive an order at either the physical address or email address you provided at the time of filing. If you do not receive an order within two weeks, you may obtain a copy of the Court order from the Clerk's Office or online at [mycase.in.gov](https://mycase.in.gov). Complete the BMV's title application checklist, and include the order with the packet of documentation you provide to the BMV. Contact the BMV at (888) 692-6841 with any questions.

IN RE: THE MATTER OF ) CASE NO. \_\_\_\_\_  
A VEHICLE TITLE REQUEST ) *(MI if value of vehicle exceeds \$10,000)*  
By \_\_\_\_\_, ) *(SC for \$10,000 or less)*  
*Petitioner,* )  
)

The Petitioner requests that the Court issue an order to the Indiana Bureau of Motor Vehicles directing the BMV to issue a certificate of title for the following vehicle. In support of this request, the Petitioner states under the penalties for perjury as follows:

County of Residence: \_\_\_\_\_

Present Location of Vehicle: \_\_\_\_\_

Address: \_\_\_\_\_

4. I certify that I am the lawful owner of the above-described vehicle.

5. I have had possession of the above-described vehicle since \_\_\_\_\_.

6. If you do not have a bill of sale, describe the circumstances how you acquired or came into possession of the vehicle and why you do not have a bill of sale.

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7. Describe the efforts you have made to obtain a title and why you cannot obtain a title for the vehicle:

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8. I am not aware of any liens against the above-described vehicle.

WHEREFORE, I respectfully request that the Court issue an order directing the Indiana Bureau of Motor vehicles to issue a certificate of title for the above-named vehicle and for all other just and proper relief.

**I SWEAR OR AFFIRM UNDER THE PENALTIES FOR PERJURY THAT THE FOREGOING REPRESENTATIONS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I FURTHER CERTIFY THAT THE FOREGOING PLEADING COMPLIES WITH THE REQUIREMENTS OF TRIAL RULE 5(G) WITH REGARD TO INFORMATION EXCLUDED FROM THE PUBLIC RECORD UNDER RULE 7 OF THE RULES ON ACCESS TO COURT RECORDS.**

Dated: \_\_\_\_\_ Signature: \_\_\_\_\_

Printed: \_\_\_\_\_

STATE OF INDIANA ) IN THE VANDERBURGH SUPERIOR COURT  
 )  
COUNTY OF VANDERBURGH )

IN RE: THE MATTER OF ) CASE NO. \_\_\_\_\_  
A VEHICLE TITLE REQUEST ) (MI if value of vehicle exceeds \$10,000)  
By \_\_\_\_\_, ) (SC for \$10,000 or less)  
Petitioner, )  
 )

NOTICE OF HEARING FOR PETITIONER  
ON VERIFIED REQUEST FOR AN ORDER REQUIRING THE  
INDIANA BUREAU OF MOTOR VEHICLES TO ISSUE A TITLE  
(if filed in Small Claims Court)

A hearing on the the verified request for an order requiring the Indiana Bureau of Motor Vehicle has been scheduled in the Vanderburgh Superior Court, Courts Building, 825 Sycamore Street, Room 223, Evansville, Indiana, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ .M.

You may represent yourself at this hearing or have an attorney represent you. If either party is a business entity (*i.e.*, corporation, LLC, LLP, partnership, or sole proprietorship) or trust, the business entity or trust must be represented by an attorney if the alleged value of the vehicle is greater than \$6,000.00. If the value of the vehicle is \$6,000.00 or less, a business entity may designate a full-time employee to appear on its behalf. If the value of the vehicle is \$6,000.00 or less, a trust may designate its trustee to appear on its behalf. The designation must be in writing and granted in accordance with the Indiana Small Claims Rule 8(C).

**If you fail to appear for the hearing, your petition will most likely be dismissed and you will have to refile the matter to obtain an order.**

You should bring to the hearing all documents in your possession or under your control concerning the claim. You may subpoena witnesses to appear for the hearing. You have a right to a jury trial, but you waive this right by filing the case in small claims court.

You may visit <https://www.in.gov/courts/publications/small-claims-manual/> to view the Indiana Small Claims Manual and Indiana Small Claims Rules.

Dottie Thomas, Clerk

By: \_\_\_\_\_  
Deputy Clerk, Small Claims Division



## REQUEST FOR CERTIFIED RECORDS

State Form 53789 (R12 / 2-18)

Approved by State Board of Accounts, 2018

Bureau of Motor Vehicles

### BUREAU OF MOTOR VEHICLES

Attn: Records Request

100 N. Senate Ave., Rm N412

Indianapolis, IN 46204

888-692-6841

- INSTRUCTIONS:**
1. Complete in blue or black ink or type.
  2. Complete all five (5) steps when requesting records. If any of the steps are not completed, the request will be returned.  
STEP 1 - Complete applicable information.  
STEP 2 - Complete as many identifiers as possible.  
STEP 3 - Check **ONE** box unless requesting a juvenile history. Attach one form for each record requested.  
STEP 4 - Indicate which exception authorizes you to receive protected information, as well as your intended use.  
STEP 5 - Calculate the total payment amount, sign and date the form.
  3. Include payment with completed form, by money order, cashier's check, or business check, made out to the Indiana BMV. **ONLY individuals who have an INDIANA BMV record may write a personal check payable to the Bureau of Motor Vehicles. Personal checks from customers who do not have an Indiana BMV record cannot be accepted.**
  4. Mail the completed form along with payment to the address indicated above.
  5. Please allow two (2) to four (4) weeks to process this request.

The Indiana Bureau of Motor Vehicles (BMV) maintains driver, vehicle, and other records available to the public unless protected by statute (Indiana Code § 5-14-3-1 *et. seq.*). Certain information contained in a BMV record may not be disclosed except as authorized by Indiana Code. Recipients of BMV records containing personal or highly restricted personal information must follow state and federal privacy laws regarding document usage, distribution, and retention. Juvenile records cannot be disclosed unless a person is requesting his or her own records or the records are requested by the minor's parent, legal guardian, or financially responsible party. Many BMV public records are immediately available through subscription at IN.gov. Individuals can access their own driver and vehicle records online at myBMV.com.

### STEP 1: Complete your information.

|   |   |  |                |
|---|---|--|----------------|
| Name of Person or Business (first name, middle name, last name) |   | Telephone Number   | E-mail Address |
| Mailing Address (number and street, city, state and ZIP code)   |   |  |                |
| Last 4 Digits of Social Security Number<br>XXX-XX-_____         | Last 4 Digits of I-94 Admission Number<br>(if applicable)<br>XXXXXXX_____ | Federal Identification Number of Business<br>(Used for security purposes only.)<br>_____ |                |

### STEP 2: Complete the appropriate fields either for driver or vehicle records. (Include as many identifiers as possible.)

#### Driver Records

|  |  |   |
|--|--|---|
| Name of Driver (first name, middle name, last name)                              |  | Driver's License Number, if known                 |
| Last 4 Digits of Driver's Social Security Number,<br>if known<br>XXX-XX-_____    | Last 4 Digits of Record of Admission number (I-94),<br>if applicable<br>XXXXXXX_____ | Driver's Date of Birth (mm/dd/yyyy),<br>if known. |
| Last Known Indiana Mailing Address (number and street, city, state and ZIP code) |  |   |

#### Vehicle Records

|   |                           |  |  |  |                            |  |  |   |              |  |  |  |  |  |  |
|---|---------------------------|--|--|--|----------------------------|--|--|---|--------------|--|--|--|--|--|--|
| Last Known Vehicle Owner Name (first name, middle name, last name)                            |                           |  |  |  |                            |  |  |   |              |  |  |  |  |  |  |
| Vehicle / Watercraft Year   | Vehicle / Watercraft Make |  |  |  | Vehicle / Watercraft Model |  |  |   | Title Number |  |  |  |  |  |  |
| Vehicle / Watercraft Identification Number  |                           |  |  |  |                            |  |  |   |              |  |  |  |  |  |  |
| Name of Registrant (first name, middle name, last name)                                       |                           |  |  |  |                            |  |  | Vehicle Plate or Watercraft Registration Number |              |  |  |  |  |  |  |
| Registrant's Last Known Indiana Mailing Address (number and street, city, state and ZIP code) |                           |  |  |  |                            |  |  |   |              |  |  |  |  |  |  |

### STEP 3: Check the type of record you are requesting.

|                                     |   |
|-------------------------------------|---|
| <input type="checkbox"/>            | Certified Driver Record (\$4.00 fee per Indiana Code § 9-14-12-7)   |
| <input type="checkbox"/>            | Certified Driver History (includes document copies of suspension notices and citations)(\$8.00 fee per Indiana Code § 9-14-12-7)<br>Documents requested: _____  |
| <input type="checkbox"/>            | Proof of Insurance (Specify vehicle make and date of accident.) _____   |
| <input checked="" type="checkbox"/> | Certified Vehicle/Watercraft Title Inquiry (\$4.00 fee per Indiana Code § 9-14-12-7) – Information regarding <b>CURRENT</b> owner including any liens, year, make, model, and VIN/HIN, odometer reading and vehicle/watercraft purchase date.   |
| <input type="checkbox"/>            | Certified Vehicle/Watercraft Title History (\$8.00 fee per Indiana Code § 9-14-12-7) – Information regarding <b>ALL</b> previous Indiana vehicle owners for the past ten (10) years, or the previous five (5) years if no changes were made to the title during that five (5) year period.  |
| <input type="checkbox"/>            | Certified Vehicle/Watercraft Registration Inquiry (\$4.00 fee per Indiana Code § 9-14-12-7) - Information regarding <b>CURRENT</b> registrant, county and township of registration, registration fees and taxes paid, purchase date, year, make, model, VIN/HIN, insurance information, type, color and plate or watercraft registration number or license type with expiration date. |
| <input type="checkbox"/>            | Certified Vehicle/Watercraft Registration History (\$4.00 fee per Indiana Code § 9-14-12-7) – Information regarding a <b>PREVIOUS REGISTRATION</b> within the last four (4) years.  |

|  |                   |
|--|-------------------|
| <b>STEP 4: I am requesting records containing personal information for the intended use listed in the statutory exception below:</b>   |                   |
| <input type="checkbox"/> I am requesting my personal information. <i>(Include a copy of your photo identification.)</i>  |                   |
| <input type="checkbox"/> I am a legal guardian or have power of attorney for the person whose record is requested. <i>(Authorizing guardianship or power-of-attorney documents and photo identification must be submitted with this form.)</i>   |                   |
| <input type="checkbox"/> I am a law enforcement officer requesting: <input type="checkbox"/> records or <input type="checkbox"/> a photograph for an investigation (Indiana Code § 9-14-13-2).<br>Badge number: _____ Law enforcement agency: _____<br>Name and title of the agency's chief officer (e.g. John Smith, Sheriff): _____<br>_____ |                   |
| <input type="checkbox"/> I am requesting for use by a government agency in carrying out its functions (Indiana Code § 9-14-13-7(1)).<br>Government entity: _____ Government function(s): _____   |                   |
| <input type="checkbox"/> Matters concerning vehicle safety, emissions, recalls, performance, dealers, parts, market research, manufacturer record owner amendment, or fuel theft (Indiana Code § 9-14-13-6 or §9-14-13-7(2)).  |                   |
| <input type="checkbox"/> In the normal course of business to verify information received (Indiana Code § 9-14-13-7(3)).  |                   |
| <input checked="" type="checkbox"/> Pending litigation: civil, criminal, administrative, or arbitration proceeding (Indiana Code § 9-14-13-7(4)). <i>Provide cause number.</i>   |                   |
| <input type="checkbox"/> Research activities (Indiana Code § 9-14-13-7(5)).  |                   |
| <input type="checkbox"/> Insurance claims investigations or underwriting (Indiana Code § 9-14-13-7(6)).  |                   |
| <input type="checkbox"/> Notice to owners of towed or impounded vehicles (Indiana Code § 9-14-13-7(7)).  |                   |
| <input type="checkbox"/> Licensed private investigative agency or security service (Indiana Code § 9-14-13-7(8)). Provide a copy of credentials.   |                   |
| <input type="checkbox"/> Employer or its agent to verify commercial driver's license information (Indiana Code § 9-14-13-7(9)).  |                   |
| <input type="checkbox"/> Private Toll Operation (Indiana Code § 9-14-13-7(10)).  |                   |
| <input type="checkbox"/> The BMV has obtained written consent of the subject and the information can be used for any purpose under Indiana Code § 9-14-13-7(11). If not signed below, provide a copy of consent.   |                   |
| <input type="checkbox"/> The person whose information I am seeking to use under Indiana Code § 9-14-13-7(13) and -8 provides written consent below.<br>I, _____, consent to the release of my restricted information (defined above) to the requestor.<br><i>(To be signed by record owner.)</i><br>PRINTED NAME: _____ SIGNATURE: _____       |                   |
| <input type="checkbox"/> Surveys, marketing or solicitations and the BMV has obtained written consent of the subject (Indiana Code § 9-14-13-7(12)).   |                   |
| <b>STEP 5: Calculate the amount owed, sign and date form.</b>  |                   |
| Total amount owed: _____ \$4.00  |                   |
| <input checked="" type="checkbox"/> I swear or affirm under the penalties for perjury the information on this form is true and accurate. I will limit disclosure of all information received to the permissible use authorized by the Indiana Code selected above and the Driver Privacy Protection Act (18 USC § 2721).                       |                   |
| Printed name   | Date (mm/dd/yyyy) |
| Signature  |                   |

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To: \_\_\_\_\_  
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 \_\_\_\_\_

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If you wish to file a counterclaim, you must do so by filing it with the Clerk's office within such time as it will allow the Court to mail a copy to the Petitioner at least seven (7) days prior to the hearing.

You have a right to a jury trial. Your right to a jury trial is waived unless a jury trial is requested within ten (10) days after receipt of the notice of claim. Once a jury trial request has been granted, it may not be withdrawn without the consent of the other party or parties. If a



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