



STATE OF INDIANA

Eric J. Holcomb, Governor

Peter L. Lacy, Commissioner

ABANDONED MANUFACTURED HOME Title Application Checklist

A private landowner who finds a manufactured home (or mobile home) that the person believes to be abandoned on real estate the person owns or controls, including rental property, may sell or salvage the manufactured home if it was built at least 15 years ago, and has been left without permission on the landowner's real estate for at least 60 days. The landowner must fulfill the statutory obligations contained in Indiana Code 9-22-1.5 prior to selling or salvaging the manufactured home.

If a manufactured home has been abandoned in a mobile home community, as defined in Indiana Code 16-41-27-5, the mobile home community must fulfill the statutory obligations contained in Indiana Code 9-22-1.7 prior to selling or salvaging the manufactured home.

Upon fulfilling the statutory obligations, the landowner/mobile home community may complete the Affidavit of Sale or Disposal – Abandoned Manufactured Home – State Form 50635 to assign ownership to a purchaser without a certificate of title.

Applications for sale or disposal of an abandoned manufactured home are processed by the BMV Central Office. 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 Certificate of Title for a Vehicle – State Form 205](#)
- [Affidavit of Sale or Disposal – Abandoned Manufactured Home - State Form 50635](#)
- [Physical Inspection of a Vehicle or Watercraft – State Form 39530](#). Must be completed by a law enforcement officer. If the vehicle does not have a vehicle identification number (VIN), you must include the [Request for Special Identification Number – MVIN Application Packet](#).
- Lien release, if necessary. A certified letter to the lien holder may serve as proof of lien release, 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 the last 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 or watercraft (as applicable) title application fees and taxes. Payable by MasterCard or Visa, check, electronic check, or money order.
 - \$15 vehicle title application fee.
 - \$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.
- Manufactured Home color: _____ (List color on line)

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 (R10 / 11-18)
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.					I swear or affirm that I am authorized to perform this transaction, and I agree to indemnify and hold harmless the Indiana BMV from any and all liability arising from this transaction.									
Vehicle Identification Number					I swear or affirm that the information that I have entered on this form is correct. I understand that making a false statement on this form may constitute the crime of perjury.									
<table border="1"> <tr> <td>Year</td> <td>Make</td> <td>Model</td> <td>Type</td> <td>Date (mm/dd/yyyy)</td> </tr> </table>					Year	Make	Model	Type	Date (mm/dd/yyyy)	Applicant Signature: _____				
Year	Make	Model	Type	Date (mm/dd/yyyy)										
Inspector's Printed Name and Title					Printed Name: _____									
Inspector's Signature					Applicant Signature: _____									
Badge, Branch, or Dealer Plate Number					Printed Name: _____									
Transaction Number					Date (mm/dd/yyyy): _____									
Branch Number					Invoice Number									
Social Security Number / Federal Identification Number *					BMV Use Only									
Name of Applicant					State									
Residence Address (number and street)					City									
Vehicle Identification Number					ZIP Code									
Vehicle Year					Odometer									
Vehicle Make					Vehicle Model									
Vehicle Type					Former Title Number									
Purchase Date (mm/dd/yy)					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									
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.														
Selling Price		Less Trade-In / Discount		Amount Subject to Tax		Amount of Tax		Dealer						
\$		\$		\$		\$		Branch						
								Exempt						
								Exemption Code						



AFFIDAVIT OF SALE OR DISPOSAL – ABANDONED MANUFACTURED HOME

State Form 50635 (R4 / 7-16)
Approved by State Board of Accounts, 2016
INDIANA BUREAU OF MOTOR VEHICLES

BUREAU OF MOTOR VEHICLES
100 North Senate Avenue, N411
Indianapolis, IN 46204

- INSTRUCTIONS:**
1. Complete in blue or black ink, or print form.
 2. Private landowners must meet the requirements set out in Indiana Code 9-22-1.5 prior to selling or salvaging a manufactured home.
 3. The applicant must pay the appropriate fee under Indiana Code 9-17 or Indiana Code 9-22, as applicable, to apply for title or a certificate of authority.
 4. A mobile home community, as defined in Indiana Code 16-41-27-5, must meet the requirements set out in Indiana Code 9-22-1.7 prior to selling or salvaging a manufactured home.

SECTION 1 – MANUFACTURED HOME INFORMATION														
Identification Number										Year	Make	Model	Length	Color

SECTION 2 – MANUFACTURED HOMEOWNER INFORMATION			
Name of Homeowner			
Address (number and street)		City	State ZIP Code
Name of Lienholder or Other Interested Party			
Address (number and street)		City	State ZIP Code
Date of Notices (mm/dd/yyyy)	Method Notice was Sent: (check box) <input type="checkbox"/> Certified mail <input type="checkbox"/> Personal delivery <input type="checkbox"/> Electronic service (under IC 9-22-1-19) <input type="checkbox"/> Posting of notice	Newspaper Name	Advertisement Dates (mm/dd/yyyy)
30 day _____ 10 day _____			1 st _____ 2 nd _____

SECTION 3 – LANDOWNER INFORMATION			
Name of Landowner			
Mailing Address (number and street)		City	State ZIP Code
Address Where Manufactured Home was Abandoned (number and street)		City	State ZIP Code
Landowner is a: (check one)			
<input type="checkbox"/> Private Property Landowner: I am a private property landowner and all requirements set out in Indiana Code 9-22-1.5 have been met. <input type="checkbox"/> A Mobile Home Community: I am a representative of a mobile home community defined in Indiana Code 16-41-27-5 and all requirements set out in Indiana Code 9-22-1.7 have been met.			

SECTION 4 – SALE / AUCTION INFORMATION			
Select the sale status that applies:			
<input type="checkbox"/> Sold <input type="checkbox"/> Auction produced no purchaser – manufactured home will be donated <input type="checkbox"/> Auction produced no purchaser – manufactured home will be retained or sold by landowner <input type="checkbox"/> Auction produced no purchaser – manufactured home will be disposed of by landowner			
Name of Purchaser (If the auction did not produce a purchaser, the landowner or recipient of donation is entered as the purchaser.)			
Address (number and street)		City	State ZIP Code
Amount of Winning Bid (Enter "0" if donated or auction produced no purchaser.)	Date of Sale (mm/dd/yyyy)	Auctioneer	Auctioneer License Number

SECTION 5 – LANDOWNER'S AFFIDAVIT		
I swear and affirm under the penalties for perjury that:		
1. I have complied with all the requirements contained in Indiana Code 9--22-1.7-5; 2. The manufactured home was left on the property without permission for _____ days (must be completed); 3. I have incurred expenses, including the expense of the sale, in the amount of \$ _____ (must be completed); 4. The name and address of the purchaser, if any, and the amount of the winning bid listed above are accurate to the best of my knowledge.		
Signature of Landowner	Printed Name	Date Signed (mm/dd/yyyy)



COLLECTION OF PAYMENT INFORMATION

State Form 56163 (R2 / 6-19)
INDIANA BUREAU OF MOTOR VEHICLES

BUREAU OF MOTOR VEHICLES

Central Office Finance
100 N. Senate Avenue, Room N440
Indianapolis, IN 46204
(888) 692-6841

- 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, Discover, American Express, 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				
Account Holder (first, middle, last name or company name)		Driver's License Number or Federal Identification Number		Telephone Number
Billing Address (number and street)			City	State ZIP Code
SECTION 2 - PAYMENT INFORMATION				
Amount to be Charged: \$ _____ . _____		Description of the service / application to which the payment is related		
CREDIT CARD PAYMENT				
Type of Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express				
Credit Card Number: _____ - _____ - _____ - _____			Expiration Date (mm/yy): ____ / ____	
ELECTRONIC CHECK PAYMENT				
Routing Number				
Account Number				
SECTION 3 - AFFIRMATION STATEMENT				
I hereby authorize the Indiana Bureau of Motor Vehicles to charge the account indicated above.				
Signature of Account Holder / Authorized User		Printed Name		Date Signed (mm/dd/yyyy)