



**AFFIDAVIT OF POLICE OFFICER  
Physical Inspection of an Indiana Resident's VEHICLE**

State Form 39530 (R4 / 12-96)

**INSTRUCTIONS:** Use reverse side for watercraft.

In accordance with Indiana Code 9-29-4-2, a fee not to exceed \$5.00 may be assessed. However, a law enforcement agency cannot collect any fee until they meet all provisions found under IC 9-29-2. Authorized Indiana dealers cannot assess a fee.

**NOTE TO LAW OFFICER / AUTHORIZED INDIANA DEALER**

1. A Title or Certificate of Origin does not have to be present to complete this affidavit.
2. You are required to physically inspect the vehicle to verify the existence and condition of the vehicle ID number.

Name of owner	Address of owner
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I, the undersigned law enforcement officer / authorized Indiana dealer, hereby swear or affirm that I have personally examined the vehicle described as follows:

**1. VEHICLE INFORMATION (if vehicle was assembled, go to Item 2)**

Year	Make	Type (i.e. motorcycle, RV, van)
Plate number / State		Vehicle Identification Number (VIN)

**2. VEHICLE INFORMATION FOR AN ASSEMBLED UNIT (assembled means any unit that does not have a manufacturers VIN in place)**

Year	<b>ASM</b>	Type (i.e. motorcycle, RV, van)
Plate number / State		Vehicle Identification Number (VIN)

*If present, please provide serial numbers for major component parts.*

Engine	Frame	Transmission	Other (specify)
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**3. WAS AN IDACS / NCIC CHECK PERFORMED? (Police Officer only)**

Check one <div style="text-align: center;"> <input type="checkbox"/> Yes    <input type="checkbox"/> No         </div>	If Yes, did VIN conform to standards? <div style="text-align: center;"> <input type="checkbox"/> Yes    <input type="checkbox"/> No         </div>
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**NOTE TO LAW OFFICER / AUTHORIZED INDIANA DEALER**

**THE BMV WILL NOT ACCEPT THIS AFFIDAVIT IF THE INFORMATION REQUESTED IN THIS BOX IS NOT COMPLETE AND LEGIBLE.**

Printed name of inspecting officer	Title of inspecting officer	
Name of department / dealership	City	State
ID number / Dealer number	Telephone number (      )	

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 of inspecting officer	Date signed (month, day, year)
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