



AFFIDAVIT OF TRANSFER TO REAL ESTATE Manufactured Home Application Checklist

A person who holds a certificate of title, a certificate of origin, or otherwise owns as an improvement, a manufactured home that is attached to real estate by a permanent foundation may apply for an Affidavit of Transfer to Real Estate (ATRE). However, a person is not required to apply for an ATRE to convert a manufactured home that is attached to real estate by a permanent foundation to an improvement upon the real estate upon which it is located.

When submitting paperwork, include the following:

- [Affidavit of Transfer to Real Estate - State Form 51408](#)
- Proof of Ownership: A manufacturer's certificate of origin, certificate of title, bill of sale, purchase or settlement agreement, warranty or Sherriff's deed, etc.
- A manufactured home must have a vehicle identification number (VIN), serial number, certification label from the U.S. Department of Housing and Urban Development. If the manufactured home does not have a VIN, serial number, or a certification label, you must include the [Request for Special Identification Number – MVIN Application Packet](#).
- \$15.00 ATRE Fee. Payable by 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:

**Indiana Bureau of Motor Vehicles
ATRE Department
100 North Senate Avenue, Room N417
Indianapolis, IN 46204**

If the BMV determines that sufficient credible evidence exists to substantiate the applicant's claim of ownership, the manufactured home title will be retired in the BMV's records. **If all required documents are not submitted or information is incomplete, the entire application will be returned.**

Please include this checklist with your application.



AFFIDAVIT OF TRANSFER TO REAL ESTATE

State Form 51408 (R4 / 1-17)
Approved by State Board of Accounts, 2017
INDIANA BUREAU OF MOTOR VEHICLES

INDIANA BUREAU OF MOTOR VEHICLES
ATRE Department
100 North Senate Avenue, N417
Indianapolis, IN 46204

* This agency is requesting disclosure of your Social Security Number / Federal Identification Number to ensure accuracy of records in accordance with IC 4-1-8-1. Disclosure is voluntary and you will not be penalized for refusal.

- INSTRUCTIONS:**
1. Complete in blue or black ink, or print form.
 2. Mail the completed form and supporting documents to the address indicated above.

Section 1 - Manufactured Home Owner			
Name of Applicant (last, first, middle initial or company name)		Indiana Driver's License Number, Social Security Number, or Federal Identification Number	
Address (number and street)		City	State ZIP Code
Section 2 - Return Packet Address			
Include the name and address to which documents should be returned if different than the manufactured home owner.			
Name (last, first, middle initial or company name)			
Address (number and street)		City	State ZIP Code
Section 3 - Manufactured Home Information			
Year	Make	Model	
Provide at least one of the following (required):	<input type="checkbox"/> Unique Serial Number:		
	<input type="checkbox"/> HUD Certification Number:		
	<input type="checkbox"/> Special Identification Number issued by the Bureau:		
Lienholder Name (if applicable)			
Lienholder Address (number and street)		City	State ZIP Code
Section 4 - Real Estate Information			
Address (number and street)			
City	State	ZIP Code	County
Parcel Number (required)			
Legal Description of Real Estate (required - attach additional sheets if necessary)			

Section 5 - Attestation of Permanent Attachment to Real Estate

I swear and affirm under the penalties for perjury that the manufactured home, as described in Section 3 above, is permanently attached to real estate, as described in Section 4 above, and 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 Applicant	Printed Name	Date Signed (mm/dd/yyyy)
Signature of Applicant	Printed Name	Date Signed (mm/dd/yyyy)

Section 6 - Notary Certification

State of _____ } SS: _____ (SEAL)
 County of _____ } SS: _____

Sworn to before me, a Notary Public, in and for said County, this _____ day of _____, 20____

Signature	Printed Name	Date (mm/dd/yyyy)
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Section 7 - AFFIDAVIT OF TRANSFER TO REAL ESTATE

BMV Use Only

The Indiana Bureau of Motor Vehicles certifies that this manufactured home has been "retired" from the Bureau's active title file and no further transactions will be allowed.

It is the responsibility of the owner of the manufactured home/real estate, in accordance with Indiana Code 9-17-6-15.3, to deliver this document to the county auditor for endorsement required by Indiana Code 36-2-9-18. Furthermore, it is also the responsibility of the owner of the manufactured home/real estate to record this Affidavit of Transfer to Real Estate in the county in which the manufactured home/real estate is located.

(Seal of the Indiana Bureau of Motor Vehicles)

In testimony whereof, I and my duly authorized representative execute this certification and affix the seal of the Indiana Bureau of Motor Vehicles.

This instrument was prepared by the Indiana Bureau of Motor Vehicles. I swear and affirm under the penalties for perjury that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

Designee of Indiana Bureau of Motor Vehicles Commissioner	Printed Name	Title	Date (mm/dd/yyyy)
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The filing in the appropriate county recorder's office of this completed affidavit with the retired certificate of title, if available, is deemed a conversion of the manufactured home that is attached to real estate by a permanent foundation to an improvement upon the real estate upon which it is located. However, a filing is not required for a person who converts a manufactured home that is attached to real estate by a permanent foundation to an improvement upon the real estate upon which it is located.



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)