Indiana Department of Revenue

STATE OF	Form ST-137AC
	State Form
AN 17	6-05

Affidavit of Exemption by a NONRESIDENT for Out-of-State Delivery of Aircraft to be Registered and/or Titled Outside the State of Indiana

Purchaser's Information and Affidavit						
Name of Purchaser				Social Security # or Federal ID #		
Address						
City		State		Zip Code		
I hereby certify under penalty of perjury that I am a resident of the State of and that the Aircraft described below will be removed from the State of Indiana within 30 days of delivery and that the aircraft will be registered/titled in the state/country of In addition, I understand that within 60 days from delivery I must provide the seller (at address shown below) with a copy of the out-of-state Registration or Title, as required in Indiana Code 6-2.5-5-39 .						
Purcr	naser's Signature			Date		
	Description of	Aircraft Purc	hase			
		Total Sale F (plus option	Price \$			
Make Model		(Aircraft only)				
Serial Number						
FAA Number N						
	Description of	Aircraft Trad	le-in			
FAA Number N	Aircraft Make & Model		Aircraft Serial	Number		
Seller's Information and Affidavit						
Name of Seller						
Address						
City				For more information about this form		
State, Zip Code				contact the Department at: (317) 232-1497		
Indiana Retail Merchant Number						
Dealer #						
I certify under the penalty of perjury that the information contained in this form is true, correct and complete to the best of my knowledge and belief. I understand that pursuant to Indiana Code 6-2.5-5-39, that within 60 days from the date of sale, I must have on file a copy of the purchaser's Out of-State Title or Registration.						
name of the state where the a be shown on this form ST-137 liable for sales tax on invalid e Delivery must be properly com	ignature s signature, Social Security Number aircraft purchased is being taken an 7AC or the sales tax exemption is i exemptions. Also, this Certification apleted and executed in duplicate. A e original copy within 30 days to:	nd the seller's s nvalid. The sell of Exemption fo	D Number, the signature must ler will be held or Out-of-State	Date Indiana Department of Revenue P.O. Box 644 Indianapolis, IN 46206-0644		