FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES APPLICATION FOR CERTIFICATE OF TITLE WITH/WITHOUT REGISTRATION SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE

www.flhsmv.gov/offices/

CHECK APPLICATION TYPE:			TRANSFER V	EHICLE T					E 🗌 VES	SEL <u>OFF-HIGH</u>	IWAY V	<u>/EHICLE</u> : [_ ATV [
1 Customer Number	Che	ck this bo	ox if you are req	uesting	OWNE	ER / AF	PLICANT INFO Owne		Co-Owner	r Unit	Number		Fleet Nu	mber
	the	certificate	of title to be pri	nted.	Are you a	Florida	resident? yes	no	yes 🗌	no				
					Are you ar	n alien?	yes	no	yes	no				
OR AND NOTE: When If applicable: Life Estate/Rer		• •	ise indicate if "or"		_		when issued. If neith Rights of Survivorsh		-	vill be issued with " County of Residenc				
Owner's Name As It Appears on Drive						VVIUI	Owner's Email A			Date of Birth	Sex	FL Driver	License or	r FEID/Suffix #
											L Driver License or FEID/Suffix #			
Co-Owner/Lessee's Name As It Appears on Driver License (First, Full Middle/Maiden, & Last Name)							Co-Owner's/Lessee's Email Address Date of Birth Sex FL Driver			License oi	r FEID/Suffix #			
Owner's Mailing Address (Mandator	ry unless a	member	of the Military)				City					State	Zip	
Co-Owner's/Lessee's Mailing Address (Mandatory unless a member of the Military)						City State Zip					Ζιр			
Owner's/Lessee's Physical Street A	ddress in I	-Iorida (N	landatory unless	s a membe	r of the Milit	ary)	City					State	Zip	
Mobile Home Physical Address (if a	pplicable) (back if in :	a mohile home ren	tal nark with	10 or more lo	te							Zip	
							City						-14	
Mail To Customer Name (If different	Mail To Customer Name (If different From Above Owner) Mail To Customer Name (If different From Above Owner)				Customer's	Email /	uddress			Date of Birth Sex		FL Driver License or FEID/		r FEID/Suffix #
Mail To Customer Address (If differe	ent From A	bove Mai	ling Address)	1			City		l			State	Zip	
2 MOTOR VEHICLE , MOBILE HOME OR VESSEL DESCRIPTION														
Vehicle/Vessel Identification Number	ər						Manufacturer	Year	Boo			Florida Titl	e Number	
Previous State of Issue	o Dict-	and D. 1	kallan Muurk	Maint.		الم م		BHP/CC		W/LOC		VAN USE, IF		
Previous State of Issue	e Plate or Ve	essel Regis	tration Number	Weight		Length Ft.	In.	BHP/CC	GV	W/LOC				
ТҮРЕ				HULI	L MATERIAI	L		PROPULSION	N		FUEL			T OF VESSEL
Open Motorboat Housebo Cabin Motorboat Pontoon		Personal Canoe	Watercraft	Wood Fiberglass	=	Aluminu Steel				Gas Diesel	(The depth of water a vessel draws)			
Auxiliary Sailboat	_	Other	日	Wood/Fibe		Sleel	Inboard Air Propelled			Electric	FT IN			
Inflatable Sailboat			Specify	Other	Specify	,	Other	Specify		_ Other_	Specify		*For all vess	sels 26' or more in
				_	E OF VESS	EL			_		opeeny	PRI	length and a EVIOUS	
Recreational (Pleasure)	I Fish 🗌		cial Blue Crab cial Live Bait	=	ommercial S ommercial S			ernment mercial Charter		mercial Sponge			T-OF-STAT GISTRATIC	E)N NUMBER:
Exempt Hire (Livery) Commercial Mackerel Commercial Shrimp No						on-Recip. 🔲 Commercial Oyster 🔲 Commercial Spiney Lobster								
Previously Federally Documented Ves U.S. Coast Guard Release From			n; or		Copy of Ca	anceled	Documentation Pape	ers	State of	Principal Use				
3			· 	BRAN	- 13		ID TYPE (Check		Boxes)			I		
														CUSTOM
ASSEMBLED FROM PARTS	BONDE	DIIILE	L KIT	CAR	GLIDER K				REPLICA		OMOUS	ELE	CTRIC	STREET ROD
	🗌 DL #	and Sex	and Date of Bir	th 🗌 DN	 MV Account	De	te of Lien	-	ler's Name					
			1											
Lienholder's Email Address			Lienhol	der's Addre	ess			City				State	Zip	
If Lienholder authorizes the Den	artment to	send the r	notor vehicle or r	nobile home	e title to the c	wner. c	heck box and counte	ersian:						
If Lienholder authorizes the Department to send the motor vehicle or mobile home title to the owner, check box and countersign: (Does not apply to vessels). If box is not checked, title will be mailed to the first lienholder. (Signature of Lienholder's Representative)														
5 TRANSFER TYPE														
SALE														
WARNING: Federal and State law requi	res that yo	u state the	e mileage in con	nection with	h an applicat	ion for a	a Certificate of Title.	Failure to comp	olete or prov	iding a false staten	nent may	result in fine	es or impris	sonment.
IWE STATE THAT THIS 5 OR 6 DIGIT ODOMETER NOW READS .XX (NO TENTHS) MILES, DATE READ/ AND IWE HEREBY CERTIFY														
THAT TO THE BEST OF MY/OUR KNC														
1. REFI	LECTS AC	TUAL MIL	EAGE.		2	IS IN E	EXCESS OF ITS ME		IITS.	3. IS	NOT TH	IE ACTUAL N	/ILEAGE.	
7 DEALER SALES TAX REPORT AND VEHICLE TRADE IN INFORMATION (IF APPLICABLE)														
FLORIDA SALES TAX REGISTRATION N	UMBER	DATE OF	SALE		DEALER LIC	ENSE N	UMBER	AMOUNT OF	ТАХ	DEALER / AGE	ENT SIGN	ATURE		
YEAR OF TRADE IN TITLE NUMBER OF TRADE IN (IF KNOWN) VEHICLE IDENTIFICATION NUMBER OF TRADE IN														

8	MOTOR VEHICLE IDENTIFICATI	ON NUMBER VERIFICATION	
PRIOR TO 1955) OF THE MOTOR VEHICLE DESCRIBED EMPLOYEE OR TAX COLLECTOR EMPLOYEE. IF THE	ON THIS FORM BY A LICENSED DEALER, FLORID /IN IS VERIFIED BY AN OUT OF STATE MOTOR VE D MOTOR VEHICLES, INCLUDING TRAILERS, (WIT	TION NUMBER (VIN) (OR THE MOTOR NUMBER FOR MOTOR VEHICLES MANUFACTUP A NOTARY PUBLIC, POLICE OFFICER, OR FLORIDA DIVISION OF MOTOR VEHICLES HICLE DEALER, THE VERIFICATION MUST BE SUBMITTED ON THEIR LETTERHEAD I ABBREVIATION OF "TL" WITH A WEIGHT OF 2,000 POUNDS OR MORE) NOT CURRE number to be: (Vehicle Identification Number)	
		(conso ronnous)	
DATE	SIGNATURE	PRINTED NAME	
Law Enforcement Officer or Florida Dealer/Agency Name		Badge # or Florida Dealer # Notary Stamp or Seal	
FL DMV/Tax Collector Employee	Florida Compliance Examiner/Ins	pector Badge or ID Number	
COMMISSIONED NAME OF FLORIDA NOTARY:(Print, Typ	e or Stamp)	RE	
9	SALES TAX EXEMPTI		
THE PURCHASE OF A RECREATIONAL VEHICLE TO BE OFFERED BEEN PURCHASED AND IS EXEMPT FROM THE SALES TAX IMPOS		Y FOR EXEMPTION. I CERTIFY THE RECREATIONAL VEHICLE, MOBILE HOME OR VESSEL DESCRIBED	HAS
PURCHASER (STATE AGENCIES, COUNTIES, ETC.) HOLDS V	ALID EXEMPTION CERTIFICATE	CONSUMER'S CERTIFICATE OF EXEMPTION NUMBER	
MOTOR VEHICLE MOBILE HOME VESSEL WI	L BE USED EXCLUSIVELY FOR RENTAL		
		SALES TAX REGISTRATION NUMBER	
I hereby certify that ownership of the motor vehicle, mobi	le home or vessel described on this application, is no	t subject to Florida Sales and Use Tax for the following reason: INHERITANCE G	GIFT
DIVORCE DECREE TRANSFER BETWEEN A MA OTHER: (EXPLAIN)	RRIED COUPLE EVEN TRADE OR TRADE DO	WN (State the facts of the even trade or trade down and the transferor information, includ the transferor's name and address, below under "Other: Explain.")	ling
10	REPOSSESSION I	ECLARATION	
IF CHECKED, THE FOLLOWING CERTIFICATIONS ARE M			
(VESSEL) A PHOTOCOPY OF THE LIEN INSTRUM I AM REQUESTING THAT AN ORIGINAL CERTIFIC	ENT FOR THE VESSEL IS REQUIRED AND ATTACHE ATE OF REPOSSESSION BE ISSUED FOR THE MOTO	AULT IN THE TERMS OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION. D. IR VEHICLE OR MOBILE HOME IN LIEU OF A TITLE (REPOSSESSION). IR VEHICLE OR MOBILE HOME, AS THE ORIGINAL HAS BEEN LOST OR DESTROYED.	
11	NON-USE AND OTHER	CERTIFICATIONS	
	OST OR DESTROYED. ED ON THE STREETS AND HIGHWAYS OF THIS STA ED ON THE WATERS OF THIS STATE UNTIL PROPER		
12	APPLICATION ATTESTME	NT AND SIGNATURES	
IWE PHYSICALLY INSPECTED THE ODOMETER/VIN AND UNDER PENALTIES OF PERJURY, I DECLARE THA		ALL CLAIMS. (More than one form HSMV 82040 may be used for additional signal AND THAT THE FACTS STATED IN IT ARE TRUE.	atures.)
SIGNATURE OF APPLICANT (OWNER)	Date	SIGNATURE OF APPLICANT (CO-OWNER) Date	
13	RELEASE OF SPOUSE (IR HEIRS INTEREST	
The undersigned person(s) state(s) as follows: That _		died on	
	(Name of Deceas	ed) (Date)	
testate (with a will)	intestate (without a will) and left	the surviving heir(s) named below.	
When applicable, the heir(s) (named below) cer	ifies that the certificate of title is lost or destroyed.		
UNDER PENALTIES OF PERJURY, I DECLARE THAT	AT I HAVE READ THE FOREGOING DOCUMEN	AND THAT THE FACTS STATED IN IT ARE TRUE.	
Print or Type Name of Spouse, Co-	(More than one form HSMV 82040 may be owner or Heir(s)	used for additional signatures.) Signature of Spouse, Co-Owner or Heir(s)	
That at the time of death the decedent was owner of the moto heir(s) at law, legatee(s), devisee(s), or otherwise to the afore		this form. The person(s) signing above hereby releases all of his/her/their right, title, interest and	d claim as
	Name of Applicant(s) (Print or Type)		
	VNERS, RESIDING IN FLORIDA OR OUT OF	STATE, SHOULD SUBMIT THIS FORM AND ALL REQUIRED DOCUMENTA ICE LOCATED IN THE APPLICANT'S COUNTY OF RESIDENCE FOR	

PROCESSING.
Check your local phone book government pages or visit the following website for current mailing addresses: <u>http://www.flhsmv.gov/offices/</u>
www.flhsmv.gov