

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTOR VEHICLES
BUREAU OF VESSEL TITLES AND REGISTRATIONS
TALLAHASSEE, FLORIDA 32399-0518

**SPECIAL AFFIDAVIT TO ACCOMPANY APPLICATION
FOR INITIAL CERTIFICATE OF TITLE**

Date _____

NOTE: This affidavit is required in those cases where the applicant(s) for a certificate of title did not receive an original certificate of title from the owner (seller, donor, etc.). This form *must* be completed in its entirety.

I (we) hereby certify that the following information is true and correct to the best of my (our) knowledge:

1. That the vessel described herein has legally come into my (our) possession by means of-

_____ (Purchase, gift, trade, inheritance, court order, etc.)

from: _____
(Name) (Address)

on the _____ day of _____ 20 _____ who did not give me (us) a valid certificate of title

because _____
(State the reason(s) given for lack of a valid certificate)

2. That I (we) have taken the following actions to obtain title from the previous owner: _____

_____ (Note: If a certified letter of request was sent and returned to you, enclose it unopened.)

3. That to the best of my (our) knowledge, said vessel has never been previously registered or titled in the State of Florida or in any other state or country.

4. That once issued, I (we) agree to defend and indemnify the Florida Department of Highway Safety and Motor Vehicles and the certificate of title against any and all claims or actions arising out of said issuance. Accordingly, this affidavit serves as a release and discharge of liability.

5. That I (we) hereby declare that all unsatisfied, recorded liens against said vessel air listed below:

Dollar amount of lien *	Lien Holder	Address	Zip Code
_____	_____	_____	_____
Dollar amount of lien (*Annotate "None" if no lien exists.)	Lien Holder	Address	Zip Code
_____	_____	_____	_____

6. That based on the above certifications and the attached evidence** of my (our) ownership of said vessel, I (we) request that certificates of title and registration be issued in my (our) name. (**Evidence may include: a notarized original bill of sale, probated will, court order, etc.)

VESSEL DESCRIPTION

FL No. _____ Year Built _____ Manufacturer's or Builder's Name _____

Hull Identification No. _____ Hull Length _____ Hull Material _____

Type of Propulsion: Outboard _____ Inboard _____ Sail _____ In/out _____ Air Propelled _____ Other (Specify) _____

Section 328.05, Florida Statutes, provides that whoever knowingly makes any false statement in any application or affidavit required under the provisions of Chapter 328, or in a bill of sale or sworn statement of ownership or otherwise commit a fraud in any application is guilty of a felony of the third degree, punishable as provided in s. 775.082, 775.083, 775.084.

Name of applicant _____ Address _____ Signature _____

Name of co-applicant _____ Address _____ Signature _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to and subscribed before me this _____ day of _____, 20 _____

(Signature of Notary)

(Print, Type or Stamp Commissioned Name of Notary Public)
Personally Known OR Produced Identification Type of Identification Produced _____
Commission Expiration: _____ (Notary Stamp or Seal)