

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

MISCELLANEOUS AFFIDAVIT

The undersigned hereby certifies the following fact(s) regarding the vessel described as:

Manufacturer's Name _____ Model Year _____

Title Number _____ FL Number _____

Hull Identification Number _____

_____ My name was entered in error as lien holder on the above title. I do not hold any lien against this vessel.

_____ The names _____ and _____ shown on the attached _____ are one and the same person.

_____ I, _____, as Clerk in the _____ County office, typed _____ on _____ in error.

_____ This is to certify that the name _____ was entered on _____ in error, and the above named person did not own or take legal possession of said vessel.

(Signature of person named)

(Signature of seller)

_____ The above vessel has not/will not be operated upon the waters in the State of Florida.

_____ The above title registered in the name of _____ has been
 lost or destroyed.

_____ The out-of-state registration on this vessel is not current because: _____

_____ After a thorough visual inspection of the vessel registered as FL _____, I have been unable to locate any existing hull identification numbers on the vessel.

_____ This is to certify that I (we) purchased this vessel on _____
(date)

_____ Other: _____

STATE OF FLORIDA
COUNTY OF _____

SIGNED: _____

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

Signature of Notary Public (State of Florida)

Print, Type, or Stamp Commissioned Name of Notary Public

Personally Known OR Produced Identification Type of Identification Produced _____

Commission Expiration: _____ (Notary Stamp or Seal)