



Terry L. Rhodes
Executive Director

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**INFORMATION ON APPLYING FOR A FLORIDA TITLE AND
PURCHASING OR TRANSFERRING A FLORIDA LICENSE PLATE**

To Whom It May Concern:

In response to your request, enclosed is an application (form HSMV 82040) for a Florida certificate of title along with a form HSMV 83140, License Plate Rate Chart, which will assist you with purchasing or transferring a Florida license plate.

The application for title must be completed using first name, middle/maiden name and last name (name on application must correspond with name of the proof of ownership). A residential or business street address in Florida must be provided unless the applicant is a resident and an active duty member of the Armed Forces of the United States. A post office box address is not acceptable unless the applicant is a resident and an active duty member of the Armed Forces of the United States.

Enter the date of birth and sex of the registered owner and co-owner (when applicable) in the spaces provided on the application. If purchasing a license plate, the registration period begins the first day of the birth month of the registered owner who is listed first on the application. See form HSMV 83140, page 3, I, for additional information.

Enter the Florida driver license number, Florida identification card number, or federal employer identification number of the owner and co-owner (when applicable) in the space(s) provided on the application. A driver's license number is not required for vehicles not owned by a natural person. The applicant(s) must provide proof of his/her identity (driver license, identification card, etc.), including proof of identity for any individual signing as an authorized agent for a company/business, when applicable.

The vehicle identification number (VIN) on all used vehicles brought in from out-of-state must be physically verified. The VIN verification section (#8) on the form HSMV 82040 must be completed.

The application for title must be accompanied by acceptable proof of ownership. For acceptable proofs, see item 16 on the enclosed form 83140, License Plate Rate Chart. Proof of ownership must be in the name of the applicant or properly assigned to the applicant. The original proof of ownership will be retained.

License plates for private passenger cars and lightweight trucks (under 5000 pounds) are transferable to similar and lesser weight vehicles without additional tax or transfer fee. See form HSMV 83140, page 4, for the calculation of fees.

Florida sales tax on the purchase price of the vehicle may be due. Use the enclosed form 83140 (see page 3, IV) to determine the sales tax due. Any declaration and/or exemption regarding sales tax on a vehicle must be recorded on the reverse side of the form HSMV 82040. An exemption from the payment of sales tax may apply when a member of the United States military, who is a permanent Florida resident, stationed outside Florida, purchases a motor vehicle or vessel outside of Florida and titles and registers the motor vehicle or vessel in Florida. The military member must provide an affidavit declaring this exemption. A sample affidavit is enclosed for your convenience.

In addition to Florida sales tax, there may be a discretionary sales surtax imposed by the county to a resident of that county. The discretionary sales surtax is based on the first \$5,000 of the purchase price. Refer to the enclosed material for participating counties. The maximum total sales tax and discretionary sales surtax to be collected on a vessel is \$18,000.

When applying for registration, proof of Personal Injury Protection (PIP) insurance and Liability insurance is required. You may complete and submit the enclosed form HSMV 83330 or submit a copy of your Florida insurance identification card, policy, or binder. Note that Florida military members stationed outside of Florida who are exempt from providing proof of Florida insurance should refer to the enclosed "Military Insurance Exemption Information."

Your application and required documentation must be submitted to the Florida tax collector's office in your county of residence. For additional information, contact the tax collector's office (list of offices enclosed) or call the Customer Service Center at (850 617-2000). You may also visit the department's website at <http://www.flhsmv.gov/>.

Enclosures

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: ☐ ORIGINAL ☐ TRANSFER **VEHICLE TYPE:** ☐ MOTOR VEHICLE ☐ MOBILE HOME ☐ VESSEL **OFF-HIGHWAY VEHICLE:** ☐ ATV ☐ ROV ☐ MC

1 OWNER / APPLICANT INFORMATION													
Customer Number		Check this box if you are requesting the certificate of title to be printed. <input type="checkbox"/>		Are you a Florida resident? <input type="checkbox"/> yes <input type="checkbox"/> no		Are you an alien? <input type="checkbox"/> yes <input type="checkbox"/> no		Unit Number		Fleet Number			
				Owner <input type="checkbox"/> yes <input type="checkbox"/> no		Co-Owner <input type="checkbox"/> yes <input type="checkbox"/> no							
<input type="checkbox"/> OR <input type="checkbox"/> AND NOTE: When joint ownership, please indicate if "or" or "and" is to be shown on title when issued. If neither box is checked, the title will be issued with "and." If applicable: <input type="checkbox"/> Life Estate/Remainder Person <input type="checkbox"/> Tenancy By the Entirety <input type="checkbox"/> With Rights of Survivorship <input type="checkbox"/> Owner's County of Residence: _____													
Owner's Name As It Appears on Driver License (First, Full Middle/Maiden, & Last Name)				Owner's Email Address				Date of Birth		Sex		FL 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 or FEID/Suffix #	
Owner's Mailing Address (Mandatory 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	
Owner's/Lessee's Physical Street Address in Florida (Mandatory unless a member of the Military)				City						State		Zip	
Mobile Home Physical Address (if applicable) Check if in a mobile home rental park with 10 or more lots. <input type="checkbox"/>				City						State		Zip	
Mail To Customer Name (If different From Above Owner)				Mail To Customer's Email Address				Date of Birth		Sex		FL Driver License or FEID/Suffix #	
Mail To Customer Address (If different From Above Mailing Address)				City						State		Zip	

2 MOTOR VEHICLE , MOBILE HOME OR VESSEL DESCRIPTION													
Vehicle/Vessel Identification Number				Make/Manufacturer		Year		Body		Color		Florida Title Number	
Previous State of Issue		License Plate or Vessel Registration Number		Weight		Length Ft. In.		BHP/CC		GVW/LOC		VAN USE, IF APPLICABLE <input type="checkbox"/> PASSENGER <input type="checkbox"/> OTHER	
TYPE <input type="checkbox"/> Open Motorboat <input type="checkbox"/> Cabin Motorboat <input type="checkbox"/> Auxiliary Sailboat <input type="checkbox"/> Inflatable <input type="checkbox"/> Houseboat <input type="checkbox"/> Pontoon <input type="checkbox"/> Airboat <input type="checkbox"/> Sailboat <input type="checkbox"/> Personal Watercraft <input type="checkbox"/> Canoe <input type="checkbox"/> Other _____ <i>Specify</i>			HULL MATERIAL <input type="checkbox"/> Wood <input type="checkbox"/> Fiberglass <input type="checkbox"/> Wood/Fiberglass <input type="checkbox"/> Other _____ <i>Specify</i>			PROPULSION <input type="checkbox"/> Outboard <input type="checkbox"/> Inboard <input type="checkbox"/> Inboard/Outboard <input type="checkbox"/> Other _____ <i>Specify</i>			FUEL <input type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Electric <input type="checkbox"/> Other _____ <i>Specify</i>			*DRAFT OF VESSEL (The depth of water a vessel draws) FT. _____ IN. _____ <i>*For all vessels 26' or more in length and all sailboats</i>	
USE OF VESSEL <input type="checkbox"/> Recreational (Pleasure) <input type="checkbox"/> Dealer/Manuf. <input type="checkbox"/> Exempt <input type="checkbox"/> Commercial Blue Crab <input type="checkbox"/> Commercial Fish <input type="checkbox"/> Hire (Livery) <input type="checkbox"/> Commercial Live Bait <input type="checkbox"/> Commercial Mackerel <input type="checkbox"/> Commercial Stone Crab <input type="checkbox"/> Commercial Shrimp Recip. <input type="checkbox"/> Commercial Shrimp Non-Recip. <input type="checkbox"/> Government <input type="checkbox"/> Commercial Charter <input type="checkbox"/> Commercial Oyster <input type="checkbox"/> Commercial Sponge <input type="checkbox"/> Commercial Other _____ <input type="checkbox"/> Commercial Spiny Lobster												PREVIOUS OUT-OF-STATE REGISTRATION NUMBER:	
Previously Federally Documented Vessel, Attach Copy of: <input type="checkbox"/> U.S. Coast Guard Release From Documentation Form; or <input type="checkbox"/> Copy of Canceled Documentation Papers								State of Principal Use					

3 BRANDS, USAGE AND TYPE (Check Applicable Boxes)																	
<input type="checkbox"/> SHORT TERM LEASE		<input type="checkbox"/> LONG TERM LEASE		<input type="checkbox"/> REBUILT		<input type="checkbox"/> POLICE VEHICLE		<input type="checkbox"/> PRIVATE USE		<input type="checkbox"/> TAXI CAB		<input type="checkbox"/> FLOOD		<input type="checkbox"/> ILEV		<input type="checkbox"/> CUSTOM	
<input type="checkbox"/> ASSEMBLED FROM PARTS		<input type="checkbox"/> BONDED TITLE		<input type="checkbox"/> KIT CAR		<input type="checkbox"/> GLIDER KIT		<input type="checkbox"/> MANUF. BUY BACK		<input type="checkbox"/> REPLICA		<input type="checkbox"/> AUTONOMOUS		<input type="checkbox"/> ELECTRIC		<input type="checkbox"/> STREET ROD	

4 LIENHOLDER INFORMATION														
CHECK IF ELT CUSTOMER <input type="checkbox"/>		<input type="checkbox"/> FEID #		<input type="checkbox"/> DL # and Sex and Date of Birth		<input type="checkbox"/> DMV Account #		Date of Lien		Lienholder's Name				
Lienholder's Email Address				Lienholder's Address				City			State		Zip	
<input type="checkbox"/> 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											
IF OWNERSHIP HAS TRANSFERRED, HOW AND WHEN WAS THE VEHICLE, MOBILE HOME, OR VESSEL ACQUIRED?											
<input type="checkbox"/> SALE		<input type="checkbox"/> GIFT		<input type="checkbox"/> REPOSSESSION		<input type="checkbox"/> COURT ORDER		<input type="checkbox"/> OTHER (SPECIFY) _____		DATE ACQUIRED ____/____/____	

6 ODOMETER DECLARATION									
WARNING: Federal and State law requires that you state the mileage in connection with an application for a Certificate of Title. Failure to complete or providing a false statement may result in fines or imprisonment.									
I/WE STATE THAT THIS <input type="checkbox"/> 5 OR <input type="checkbox"/> 6 DIGIT ODOMETER NOW READS <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .XX (NO TENTHS) MILES, DATE READ ____/____/____ AND I/WE HEREBY CERTIFY THAT TO THE BEST OF MY/OUR KNOWLEDGE THE ODOMETER READING:									
<input type="checkbox"/> 1. REFLECTS ACTUAL MILEAGE. <input type="checkbox"/> 2. IS IN EXCESS OF ITS MECHANICAL LIMITS. <input type="checkbox"/> 3. IS NOT THE ACTUAL MILEAGE.									

7 DEALER SALES TAX REPORT AND VEHICLE TRADE IN INFORMATION (IF APPLICABLE)											
FLORIDA SALES TAX REGISTRATION NUMBER			DATE OF SALE		DEALER LICENSE NUMBER		AMOUNT OF TAX		DEALER / AGENT SIGNATURE		
YEAR OF TRADE IN		MAKE OF TRADE IN			TITLE NUMBER OF TRADE IN (IF KNOWN)			VEHICLE IDENTIFICATION NUMBER OF TRADE IN			

8

MOTOR VEHICLE IDENTIFICATION NUMBER VERIFICATION

THIS SECTION REQUIRES A PHYSICAL INSPECTION AND A VERIFICATION OF THE VEHICLE IDENTIFICATION NUMBER (VIN) (OR THE MOTOR NUMBER FOR MOTOR VEHICLES MANUFACTURED PRIOR TO 1955) OF THE MOTOR VEHICLE DESCRIBED ON THIS FORM BY A LICENSED DEALER, FLORIDA NOTARY PUBLIC, POLICE OFFICER, OR FLORIDA DIVISION OF MOTOR VEHICLES EMPLOYEE OR TAX COLLECTOR EMPLOYEE. **IF THE VIN IS VERIFIED BY AN OUT OF STATE MOTOR VEHICLE DEALER, THE VERIFICATION MUST BE SUBMITTED ON THEIR LETTERHEAD STATIONERY.** COMPLETE THIS SECTION ON ALL USED MOTOR VEHICLES, INCLUDING TRAILERS, (WITH ABBREVIATION OF "TL" WITH A WEIGHT OF 2,000 POUNDS OR MORE) NOT CURRENTLY TITLED IN FLORIDA.

I, the undersigned, certify that I have physically inspected the above described vehicle and find the vehicle identification number to be: _____

(Vehicle Identification Number)

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/Inspector Badge or ID Number _____

COMMISSIONED NAME OF FLORIDA NOTARY: _____

NOTARY'S SIGNATURE _____

(Print, Type or Stamp)

9

SALES TAX EXEMPTION CERTIFICATION

THE PURCHASE OF A RECREATIONAL VEHICLE TO BE OFFERED FOR RENT AS LIVING ACCOMMODATIONS DOES NOT QUALIFY FOR EXEMPTION. I CERTIFY THE RECREATIONAL VEHICLE, MOBILE HOME OR VESSEL DESCRIBED HAS BEEN PURCHASED AND IS EXEMPT FROM THE SALES TAX IMPOSED BY CHAPTER 212, FLORIDA STATUTES, BY:

☐ PURCHASER (STATE AGENCIES, COUNTIES, ETC.) HOLDS VALID EXEMPTION CERTIFICATE

CONSUMER'S CERTIFICATE OF EXEMPTION NUMBER _____

☐ MOTOR VEHICLE ☐ MOBILE HOME ☐ VESSEL WILL BE USED EXCLUSIVELY FOR RENTAL

SALES TAX REGISTRATION NUMBER _____

I hereby certify that ownership of the motor vehicle, mobile home or vessel described on this application, is not subject to Florida Sales and Use Tax for the following reason: ☐ INHERITANCE ☐ GIFT

☐ DIVORCE DECREE ☐ TRANSFER BETWEEN HUSBAND AND WIFE ☐ EVEN TRADE OR TRADE DOWN (State the facts of the even trade or trade down and the transferor information, including the transferor's name and address, below under "Other: Explain.")

☐ OTHER: (EXPLAIN) _____

10

REPOSSESSION DECLARATION

IF CHECKED, THE FOLLOWING CERTIFICATIONS ARE MADE BY THE APPLICANT:

- ☐ I CERTIFY THAT THIS MOTOR VEHICLE, MOBILE HOME OR VESSEL WAS REPOSSESSED UPON DEFAULT IN THE TERMS OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.
- ☐ (VESSEL) A PHOTOCOPY OF THE LIEN INSTRUMENT FOR THE VESSEL IS REQUIRED AND ATTACHED.
- ☐ I AM REQUESTING THAT AN ORIGINAL CERTIFICATE OF REPOSSESSION BE ISSUED FOR THE MOTOR VEHICLE OR MOBILE HOME IN LIEU OF A TITLE (REPOSSESSION).
- ☐ I AM REQUESTING THAT A DUPLICATE CERTIFICATE OF REPOSSESSION BE ISSUED FOR THE MOTOR VEHICLE OR MOBILE HOME, AS THE ORIGINAL HAS BEEN LOST OR DESTROYED.

11

NON-USE AND OTHER CERTIFICATIONS

IF CHECKED, THE FOLLOWING CERTIFICATIONS ARE MADE BY THE APPLICANT:

- ☐ I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED.
- ☐ THE VEHICLE IDENTIFIED WILL NOT BE OPERATED ON THE STREETS AND HIGHWAYS OF THIS STATE UNTIL PROPERLY REGISTERED.
- ☐ THE VESSEL IDENTIFIED WILL NOT BE OPERATED ON THE WATERS OF THIS STATE UNTIL PROPERLY REGISTERED.
- ☐ OTHER: (EXPLAIN) _____

12

APPLICATION ATTESTMENT AND SIGNATURES

I/WE PHYSICALLY INSPECTED THE ODOMETER/VIN AND FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS. (More than one form HSMV 82040 may be used for additional signatures.)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

SIGNATURE OF APPLICANT (OWNER)

Date

SIGNATURE OF APPLICANT (CO-OWNER)

Date

13

RELEASE OF SPOUSE OR HEIRS INTEREST

The undersigned person(s) state(s) as follows: That _____ died on _____
(Name of Deceased) (Date)

☐ testate (with a will) ☐ intestate (without a will) and left the surviving heir(s) named below.

☐ When applicable, the heir(s) (named below) certifies that the certificate of title is lost or destroyed.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

(More than one form HSMV 82040 may be used for additional signatures.)

Print or Type Name of Spouse, Co-owner or Heir(s)

Signature of Spouse, Co-Owner or Heir(s)

That at the time of death the decedent was owner of the motor vehicle, mobile home or vessel described in section 2 of this form. The person(s) signing above hereby releases all of his/her/their right, title, interest and claim as heir(s) at law, legatee(s), devisee(s), or otherwise to the aforesaid motor vehicle, mobile home or vessel to:

Name of Applicant(s) (Print or Type)

RESIDENTS OF FLORIDA AND ALL VESSEL OWNERS, RESIDING IN FLORIDA OR OUT OF STATE, SHOULD SUBMIT THIS FORM AND ALL REQUIRED DOCUMENTATION TO A LOCAL FLORIDA TAX COLLECTOR'S OFFICE OR THE FLORIDA TAX COLLECTOR'S OFFICE 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: <http://www.flhsmv.gov/offices/>
www.flhsmv.gov

MILITARY INSURANCE EXEMPTION INFORMATION

The exemption for providing proof of Florida insurance applies in the following circumstances:

1. The military member or spouse is an owner, co-owner, or registrant.
- or**
2. The military member is a Florida resident stationed outside Florida.

All of the following is required:

1. An out-of-state mailing address (which will be shown on the Florida Vehicle Registration Certificate) for the military member.
2. A copy of the military orders.
- or**
- An affidavit from the military member's commanding officer that confirms the member's military orders and the date of assignment.
3. An affidavit stating the vehicle is being maintained in the member's state of military assignment and will not be driven in the state of Florida, except in a transient visitor status (see sample affidavit below).
4. A letter on letterhead stationery from the out-of-state insurance company/agent stating that the military member is currently insured in the state where he/she is actively stationed. This letter should contain all policy information including name of insured, effective date of insurance, insurance company name, policy number, and vehicles covered. (A faxed letter on letterhead stationery is permissible).

If proof of insurance is in a language other than English, it must be accompanied by a written translation into the English language.

AFFIDAVIT

_____, **certify that my vehicle is maintained in the**
(Name of Military Member or Spouse)

state of _____, where I am on military orders and will not be driven in the state of
Florida, except in a transient visitor status.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THIS DOCUMENT AND
THE FACTS STATED IN IT ARE TRUE.

(Signature of Military Member or Spouse)

**THIS EXEMPTION ONLY APPLIES TO VEHICLES REGISTERED IN THE NAME OF THE MILITARY
MEMBER OR THE NON-MILITARY SPOUSE.**

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTORIST SERVICES
SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE
www.flhsmv.gov/offices/

INITIAL REGISTRATION FEE EXEMPTION AFFIDAVIT

VEHICLE IDENTIFICATION NO.	YEAR	MAKE	BODY	PREV. STATE	TITLE NO.

PLEASE CHECK THE APPROPRIATE BOX AND SIGN

The applicant claims exemption from the \$225.00 Initial Registration Fee, which is imposed on the initial application for registration on a motor vehicle, and attests to one of the following:

- ☐ I am a qualifying member of the U.S. Armed Forces, or his or her spouse or dependent child. **I am claiming exemption # _____ (see list on the reverse side of this form in section A, 1-6, which also lists the required documents). Select exemption reason of "military." The customer must complete and sign this form to claim the exemption.**
- ☐ A Court Order declares/specifies that the applicant is the legal owner of the above described motor vehicle. Select exemption reason of "court order." (A copy of the court order must be submitted.)
- ☐ A license plate is being transferred (for a name change) due to a fictitious name change affidavit or corporate name change affidavit properly filed with the Department of State, pursuant to section 865.09, Florida Statutes. Select exemption reason of "administrative." (A copy of the name change affidavit from the Department of State must be submitted.)
- ☐ A transfer of ownership on a Florida Certificate of Title has occurred due to operation of law as provided by section 319.28, Florida Statutes. Select exemption reason of "operation of law." (A copy of the documentation which validates how the vehicle was acquired must be submitted.)
- ☐ A transfer of ownership on a Florida Certificate of Title has occurred from a person to a member of that person's immediate family as defined in 657.002, Florida Statutes, who resides in the same household. Select exemption reason of "immediate family." (NOTE: The address of the previous owner and new owner must be the same in the FRVIS system).
- ☐ A prior registration or system printout has been submitted for the following license plate number (_____), in order to claim the initial registration exemption for the recently acquired above described vehicle. Select exemption reason of "prior registration."

AN EXEMPTION REASON MUST BE SELECTED IN THE SYSTEM TO RECORD EXEMPTION.

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true.

Signature of Owner

Printed Name of Owner

Date

NOTE: Owner's signature is only required for the military exemption.

FOR FLORIDA DMS OR TAX COLLECTOR/LICENSE PLATE AGENCY USE ONLY

NOTE: Employee must verify (below) all exemptions (listed above):

- ☐ The exemption (checked above) has been verified by (County #) _____ (Agency #) _____

Signature of Employee

Printed Name of Employee

Date

A. LIST OF QUALIFYING MILITARY EXEMPTIONS:

1. I am a member of the U. S. Armed Forces, or his or her spouse or dependent child, who is not a Florida resident and is stationed in the state of Florida on military orders. Submit a copy of your military orders and out of state driver license.
2. I am a member of the U. S. Armed Forces, or his or her spouse or dependent child, who is/was not a Florida resident and is stationed in the state of Florida on military orders and is now becoming a resident of Florida. Submit a copy of your military orders and Florida driver license.

NOTE: The prior non-resident member or his/her spouse or dependent child would qualify for this exemption even if the vehicle were not previously registered in Florida as a "Registration Only." Some members retain an out of state license plate for their vehicle from their state of residence while stationed in Florida.

3. I am a former member of the U.S. Armed Forces, or his or her spouse or dependent child. I purchased this motor vehicle while stationed outside Florida. I was not dishonorably discharged nor discharged for bad conduct. I was a resident of Florida at the time of enlistment and discharge and continue to be a resident of Florida. I am applying for registration within 6 months after discharge. Submit a copy of your Discharge Order (DD214) and Florida driver license.
4. I am a member of the U.S. Armed Forces, or his or her spouse or dependent child, who was a resident of Florida at the time of enlistment and continue to be a resident of Florida. I purchased a motor vehicle while stationed outside of Florida. I have been reassigned by military orders to this state. Submit a copy of your military orders and Florida driver license.
5. I am a member of the U.S. Armed Forces, or his or her spouse or dependent child, who was a resident of Florida at the time of enlistment and continue to be a resident of Florida. I purchased a motor vehicle while stationed outside of Florida, and continue to be stationed outside of Florida. Submit a copy of your military orders and Florida driver license.
6. I am a resident of Florida and a spouse or dependent child of a member of the U.S. Armed Forces, who lost his/her life (submit proof of military death notification) or is listed as "Missing in Action" (MIA) (submit proof of MIA status).

NOTE: The member of the armed forces must have been a resident of Florida at the time of enlistment. Registration must occur within one (1) year of notification of death or MIA status.

B. THIS FORM SHOULD NOT BE USED WHEN:

1. The U.S. armed forces member is not a resident of Florida **AND** is not assigned by military orders to the state of Florida.
2. The U.S. armed forces member is dishonorably discharged or discharged for bad conduct.

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

TAX COLLECTORS MAILING LIST

ALACHUA COUNTY
5801 NW 34TH Street
Gainesville, FL. 32653
(352) 374-5263
Fax# (352) 374-5200

BAKER COUNTY
32 North 5th Street
MacClenny, FL. 32063
(904) 259-6880
Fax# (904) 259-2279

BAY COUNTY
P.O. Box 2285
Panama City, FL. 32402
(850) 248-8501
FAX# (850) 248-8541

BRADFORD COUNTY
P.O. Box 969
Starke, FL. 32091
(904) 966-6235
FAX# (904) 964-9063

BREVARD COUNTY
400 South Street, 6th Floor
Titusville, FL. 32780
(321) 264-6935
FAX# (321) 264-6995

BROWARD COUNTY
1800 NW 66th Avenue, Suite 100
Plantation, FL. 33313-4535
(954) 765-4697
FAX# (954) 321-1109

CALHOUN COUNTY
20859 Central Avenue E, RM. 107
Blountstown, FL. 32424
(850) 674-8242
FAX# (850) 674-5116

CHARLOTTE COUNTY
18500 Murdock Circle
Port Charlotte, FL. 33948
(941) 743-1350
FAX# (941) 637-2276

CITRUS COUNTY
210 N. Apopka Avenue Suite 100
Inverness, FL. 34450-4261
(352) 341-6500
FAX# (352) 341-6513

CLAY COUNTY
P.O. Box 1843
Green Grove Springs, FL. 32043
(904) 284-6320
FAX# (904) 529-3608

COLLIER COUNTY
3291 E. Tamiami Trail
Naples, FL. 34112
(239) 252-8177
Fax# (239) 774-9327

COLUMBIA COUNTY
135 NE Hernando Ave. Suite 125
Lake City, FL. 32055
(386) 758-1077
Fax# (386) 719-7460

MIAMI-DADE COUNTY
200 NW 2nd Avenue
Miami, FL. 33128
Fax# (305) 375-2871

DESOTO COUNTY
PO Box 729
Arcadia, FL. 34265
(863) 993-4861
Fax# (863) 993-4863

DIXIE COUNTY
PO Box 5040
Cross City, FL. 32628-5040
(352) 498-1213
Fax# (352) 498-1259

DUVAL COUNTY
231 E. Forsyth Street RM. 130
Jacksonville, FL. 32202
(904) 630-1916
FAX# (904) 764-2014

ESCAMBIA COUNTY
PO Box 1312
Pensacola, FL. 32591
(850) 438-6500 ex.252
Fax# (850) 432-3601

FLAGLER COUNTY
PO Box 876
Bunnell, FL. 32110
(386) 313-4160
FAX# (386) 313-4161

FRANKLIN COUNTY
PO Drawer 188
Apalachicola, FL. 32329
(850) 653-9323
FAX# (850) 653-2529

GADSDEN COUNTY
PO Box 817
Quincy, FL. 32353-0817
(850) 627-7255
FAX# (850) 875-8722

GILCHRIST COUNTY
PO Box 194
Trenton, FL. 33693
(352) 463-3178
FAX# (352) 463-3177

GLADES COUNTY
PO Drawer 1589
Moore Haven, FL. 33471
(863) 946-6035
FAX# (863) 946-3295

GULF COUNTY
1000 Cecil G. Costin Sr. Blvd. R.100
Pt. St. Joe, FL. 32456
(850) 229-6116
FAX# (850) 229-9224

HAMILTON COUNTY
207 NE First Street, RM. 104
Jasper, FL. 32052
(386) 792-1284
FAX# (386) 792-0878

HARDEE COUNTY
P.O. Box 445
Wauchula, FL. 33873-0445
(863) 773-9144
FAX# (863) 773-9679

HENDRY COUNTY
PO Box 1780
Labelle, FL. 33975-1780
(863) 675-5280
FAX# (863) 674-4087

HERNANDO COUNTY
20 North Main Street, RM. 112
Brooksville, FL. 34601-2892
(352) 754-4180
FAX# (352) 754-4189

HIGHLANDS COUNTY
540 South Commerce Avenue
Sebring, FL. 33870-3767
(863) 402-6685
FAX# (863) 402-6709

HILLSBOROUGH COUNTY
PO Box 30009
Tampa, FL. 33630-3009
(813) 635-5200
FAX# (813) 612-6774

HOLMES COUNTY
224 North Waukesha Street
Bonifay, FL. 32425
(850) 547-1115
FAX# (850) 547-0202

INDIAN RIVER COUNTY
PO Box 1509
Vero Beach, FL. 32961-1509
(772) 226-1338
FAX# (772) 770-5009

JACKSON COUNTY
PO Box 697
Marianna, FL. 32447
(850) 482-9653
FAX# (850) 526-3821

JEFFERSON COUNTY
500 West Walnut
Monticello, FL. 32344
(850) 342-0147
FAX# (850) 342-0149

LAFAYETTE COUNTY
PO Box 96
Mayo, FL. 32066-0096
(386) 294-1961
FAX# (386) 294-2462

LAKE COUNTY
PO Box 327
Tavares, FL. 32778-0268
(352) 343-9602
FAX# (352) 253-6058

LEE COUNTY
PO Box 850
Ft. Myers, FL. 33902
(239) 533-6000
FAX# (239) 533-6095

LEON COUNTY
PO Box 1835
Tallahassee, FL. 32302
(850) 606-4700
FAX# (850) 606-4701

LEVY COUNTY
PO Box 250
Bronson, FL. 32621-0250
(352) 486-5171
FAX# (352) 486-5181

LIBERTY COUNTY
PO Box 400
Bristol, FL. 32321
(850) 643-2442
FAX# (850) 643-3755

MADISON COUNTY
229 SW Pinckney Street RM.102
Madison, FL. 32340
(850) 973-6136
FAX# (850) 973-3116

MANATEE COUNTY
819 301 Blvd. West
Bradenton, FL. 34205
(941) 741-4800
FAX# (941) 741-3584

MARION COUNTY
PO Box 1178
Ocala, FL. 34478
(352) 368-8200
FAX# (352) 368-8284

MARTIN COUNTY
3485 SE Willoughby Blvd.
Stuart, FL. 34994
(772) 288-5600
FAX# (772) 288-5975

MONROE COUNTY
PO Box 1129
Key West, FL. 33041
(305) 295-5000
FAX# (305) 295-5022

NASSAU COUNTY
86130 License Road, Suite 5
Fernandina Beach, FL. 32034
(904) 491-7400
FAX# (904) 261-3231

OKALOOSA COUNTY
701 E. John Sims Pkwy., Ste.
202
Niceville, FL. 32578
(850) 651-7300
FAX# (850) 678-5790

OKEECHOBEE COUNTY
307 NW Fifth Avenue # B
Okeechobee, FL. 34972-2571
(863) 763-3421
FAX# (863) 763-2426

ORANGE COUNTY
PO Box 545100
Orlando, FL. 32854
(407) 836-4145
FAX# (407) 254-1074

OSCEOLA COUNTY
PO Box 422105
Kissimmee, FL. 34742-2105
(407) 742-4000
FAX# (407) 742-3995

PALM BEACH COUNTY
PO Box 3715
West Palm Beach, FL. 33402-3715
(561) 355-2264
FAX# (561) 355-3944

PASCO COUNTY
PO Box 276
Dade City, FL. 33526-0276
(352) 521-4360
FAX# (352) 521-4275

PINELLAS COUNTY
PO Box 4004
Seminole, FL. 33775-4004
(727) 464-7777
FAX# (727) 453-3784

POLK COUNTY
PO Box 1189
Bartow, FL. 33831
(863) 534-4700
FAX# (863) 534-4717

PUTNAM COUNTY
PO Drawer 1339
Palatka, FL. 32178-1339
(386) 329-0282
FAX# (386) 329-0284

ST. JOHNS COUNTY
PO Box 9001
St. Augustine, FL. 32085-9001
(904) 209-2250
FAX# (904) 209-2283

ST. LUCIE COUNTY
PO Box 308
Ft. Pierce, FL. 34954-0308
(772) 462-1650
FAX# (772) 462-1968

SANTA ROSA COUNTY
6495 Caroline Street, Suite E
Milton, FL. 32570
(850) 983-1800
FAX# (850) 623-8655

SARASOTA COUNTY
101 South Washington Blvd.
Sarasota, FL. 34236-6993
(941) 861-8300
FAX# (941) 861-8353

SEMINOLE COUNTY
PO Box 630
Sanford, FL. 32772-0630
(407) 665-1000
FAX# (407) 665-7922

SUMTER COUNTY
220 E. McCollum Avenue
Bushnell, FL. 33513
(352) 569-6740
FAX# (352) 569-6741

SUWANNEE COUNTY
215 Pine Avenue, Suite A
Live Oak, FL. 32064
(386) 362-2816
FAX# (386) 330-2666

TAYLOR COUNTY
PO Box 30
Perry, FL. 32348
(850) 838-3517
FAX# (850) 838-3518

UNION COUNTY
55 W. Main St. Courthouse. RM. 108
Lake Butler, FL. 32054
(386) 496-3331
FAX# (386) 496-1842

VOLUSIA COUNTY
250 North Beach Street, RM. 101
Daytona Beach, FL. 32114
(386) 254-4626
FAX# (386) 254-4638

WAKULLA COUNTY
PO Box 280
Crawfordville, FL. 32326-0280
(850) 926-3371
FAX# (850) 926-2035

WALTON COUNTY
PO Box 510
DeFuniak Springs, FL. 32435
(850) 892-8121
FAX# (850) 892-8079

WASHINGTON COUNTY
PO Box 1038
Chipley, FL. 32428-1038
(850) 638-6275
FAX# (850) 638-6067

STATE OF FLORIDA

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES - DIVISION OF MOTORIST SERVICES

SUBMIT TITLE AND REGISTRATION FORMS TO YOUR LOCAL TAX COLLECTOR OFFICE

www.flhsmv.gov/offices/

License Plate Rate Chart

*** REFER TO ADDITIONAL FEE EXPLANATION (Page 2)

TITLE REQUIRED	TAX CLASS	CLASSIFICATION	NET WEIGHT IN POUNDS	ANNUAL TAX AND OTHER FEES *		
Yes	01	Automobiles, private use	Thru 2499	\$ 46.15	The registration taxes in this section are not prorated.	
Yes	01	Automobiles, private use 2500-3499		57.15		
Yes	01	Automobiles, private use	3500 Up	70.65		
Yes	31	Trucks, private and commercial use	Thru 1999	46.15		
Yes	31	Trucks, private and commercial use	2000-3000	57.15		
Yes	31	Trucks, private and commercial use	3001-5000	70.65		
Yes	42	Chassis Mount Camper, unit affixed to truck chassis	Thru 4499	52.15		
Yes	42	Chassis Mount Camper, unit affixed to truck chassis	4500 Up	72.40		
Yes	42	Motor Home, living unit self-propelled	Thru 4499	52.15		
Yes	42	Motor Home, living unit self-propelled	4500 Up	72.40		
Yes	42	Private Motor Coach	Thru 4499	52.15	The full amount will be charged regardless of when during the registration period the vehicle is registered.	
Yes	42	Private Motor Coach	4500 Up	72.40		
**	52	Trailers, private use	Thru 500	31.90		
Yes	56	Trailers, drawn by "GVW" series truck-tractors		38.65		
Yes	62	Camp Trailers, constructed with folding walls		38.65		
No	70	Transporter		126.40		
Yes	77	Travel Trailer, up to 35 ft.		52.15		
Yes	96	Boy Scouts, Churches, etc.		29.15		
Yes	97	Exempt Government License Plates		23.35		
Yes	103	Permanent Semi-Trailer		115.35		Flat Rate
TITLE REQUIRED	TAX CLASS	CLASSIFICATION	LENGTH IN FEET	ANNUAL TAX AND OTHER FEES*	HALF YEAR TAX AND OTHER FEES*	QUARTER YEAR TAX AND OTHER FEES *
Yes	51	Mobile Homes	Up to 35	30.35	20.35	15.35
Yes	51	Mobile Homes	36 thru 40	35.35	22.85	16.60
Yes	51	Mobile Homes	41 thru 45	40.35	25.35	17.85
Yes	51	Mobile Homes	46 thru 50	45.35	27.85	19.10
Yes	51	Mobile Homes	51 thru 55	50.35	30.35	20.35
Yes	51	Mobile Homes	56 thru 60	55.35	32.85	21.60
Yes	51	Mobile Homes	61 thru 65	60.35	35.35	22.85
Yes	51	Mobile Homes	66 & Up	90.35	50.35	30.35
No	65	Motorized and Disability Access Vehicles		41.15	34.40	32.65
Yes	65	Motorcycles		41.15	34.40	32.65
No	69	Mopeds, pedal activated (motor NOT in excess of 2 BHP)		34.40	32.65	32.65
No	71	Dealer's License Plates – Franchised, Independent, Trailer Coach, Motorcycle, or Marine Boat Trailer		42.15	33.65	30.15
Yes	76	Park Trailers, regardless of length		50.15	37.65	31.40
Yes	78	Travel Trailers	Over 35	50.15	37.65	31.40
Yes	80	Antiques - Motorcycle		36.15	29.40	27.65
Yes	92	School Buses (privately owned) and Regular Wreckers		66.15	45.65	35.40
Yes	92	Hearses and Ambulances		65.65	45.40	35.28
Yes	94	Tractor Cranes, Power Shovels, Well Drillers and other such vehicles, so constructed and designed as a tool and not a hauling unit, used on the roads and highways incidental to the purpose for which designed.		69.15	47.15	36.16
Yes	95	Antiques - Passenger Cars		36.90	31.78	31.65

License Plate Rate Chart (continued)

These categories are computed based on CWT (per each 100 pounds) and may be purchased for 12, 6, or 3 months. Add the flat tax plus \$1.50 per each 100 pounds to determine the annual tax amount. Then compute one-half or one-quarter of the Annual Tax, if applicable. Add service and other fees.

TITLE REQUIRED	TAX CLASS	CLASSIFICATION	WEIGHT	ANNUAL TAX FLAT (per cwt)	SERVICE AND OTHER FEES *
**	54	Trailers, "For Hire"	Thru 1999 lbs.	\$ 3.50 + 1.50 +	25.15
Yes	54	Trailers, "For Hire"	2000 lbs. & up	13.50 + 1.50 +	25.15
Yes	09	Automobiles "For Hire"	Passengers up to 8	17.00 + 1.50 +	25.15

TITLE REQUIRED	TAX CLASS	CLASSIFICATION	MONTHLY PRORATION OF TAX											
		GVW	12	11	10	9	8	7	6	5	4	3	2	1
Yes	39	Forestry Trk-Trac	359.15	332.15	305.15	278.15	251.15	224.15	197.15	170.15	143.15	116.15	89.15	62.15
Yes	41	Trk-Trac 5001-5999	85.90	80.84	75.78	70.71	65.65	60.59	55.53	50.46	45.40	40.34	35.28	30.21
Yes	41	Trk-Trac 6000-7999	112.90	105.58	98.28	90.96	83.65	76.34	69.03	61.71	54.40	47.09	39.77	32.47
Yes	41	Trk-Trac 8000-9999	128.15	119.57	110.98	102.40	93.82	85.23	76.65	68.07	59.48	50.90	42.32	33.73
Yes	41	Trk-Trac 10000-14999	153.15	143.32	133.48	123.65	113.82	103.98	94.15	84.32	74.48	64.65	54.82	44.98
Yes	41	Trk-Trac 15000-19999	212.15	197.40	182.65	167.90	153.15	138.40	123.65	108.90	94.15	79.40	64.65	49.90
Yes	41	Trk-Trac 20000-26000	286.15	265.23	244.32	223.40	202.48	181.57	160.65	139.73	118.82	97.90	76.98	56.07
Yes	41	Trk-Trac 26001-34999	359.15	332.15	305.15	278.15	251.15	224.15	197.15	170.15	143.15	116.15	89.15	62.15
Yes	41	Trk-Trac 35000-43999	440.15	406.40	372.65	338.90	305.15	271.40	237.65	203.90	170.15	136.40	102.65	68.90
Yes	41	* Trk-Trac 44000-54999	808.15	743.73	679.32	614.90	550.48	486.07	421.65	357.23	292.82	228.40	163.98	99.57
Yes	41	* Trk-Trac 55000-61999	951.15	874.82	798.48	722.15	645.82	569.48	493.15	416.82	340.48	264.15	187.82	111.48
* For GVW Wreckers 44,000-55,000 lbs., reduce the fee by \$1.00. * For GVW wreckers 55,000-62,000 lbs., reduce the fee by \$1.00.														
Yes	41	Trk-Trac 62000-71999	1115.15	1025.15	935.15	845.15	755.15	665.15	575.15	485.15	395.15	305.15	215.15	125.15
Yes	41	Trk-Trac 72000-80000	1357.15	1246.99	1136.81	1026.65	916.49	806.31	696.15	585.99	475.81	365.65	255.49	145.31
Yes	91	Antique Trk - 5000 lbs. Net Wt.	36.90	36.05	35.19	34.34	33.48	32.63	31.78	31.65	31.65	31.65	31.65	31.65
Yes	93	Goat	35.90	34.55	33.69	32.84	31.98	31.13	30.28	30.15	30.15	30.15	30.15	30.15
Yes	102	Agri, Trk, Trac thru 43999	122.90	115.58	108.28	100.96	93.65	86.34	79.03	71.71	64.40	57.09	49.77	42.47
Yes	102	Agri, Trk, Trac 44000 – 80000	359.15	332.15	305.15	278.15	251.15	224.15	195.15	170.15	143.15	116.15	89.15	62.15

The categories below are computed based on CWT (per each 100 pounds) and may be monthly prorated. Add the flat fee plus the \$1.50 or \$2.00 amount, whichever applies, per each 100 pounds to determine the annual tax amount. Divide by 12 months to determine the tax per month. Then compute the tax by multiplying the monthly rate times the number of tax months due and add the service and other fees to determine the total amount.

TITLE REQUIRED	TAX CLASS	CLASSIFICATION	NET WEIGHT IN POUNDS	ANNUAL TAX FLAT (per cwt)	SERVICE AND OTHER FEES *
**	53	Trailers, Private Use	501 Up	\$ 3.50 + 1.00 +	25.15
Yes	36	Buses May be registered semi-annually for one-half of registration tax and \$2.50 semi-annual fee.	Passengers 9 Up	17.00 + 2.00 +	35.15

FEES: * \$.10 Emergency Medical Services \$1.00 Air Pollution Control \$2.80 Advanced Replacement
 \$ 1.50 Reflectorization \$1.00 Law Enforcement Radio System \$2.50 Accident Records
 \$ 1.25 FRVIS \$1.50 Transportation Disadvantaged \$5.00 Service Charge
 \$ 5.50 Juvenile Justice \$4.00 Surcharge for State Transportation \$10.00 State Transportation
 \$ 3.00 Decal on Demand

** Trailers through 1999 pounds, are NOT titled.

*** Add \$28.00 when metal license plate is to be issued.

Add \$225.00 Initial Registration Fee when applicable. Refer to License Plate Rates Instruction Sheet (page 3) for additional information.

LICENSE PLATE RATES INSTRUCTION SHEET

I. REGISTRATION PERIODS

The 12 month registration period begins the first day of the owner's birth month (Exceptions: Company owned vehicles use the month of June; truck-tractors, semi-trailers, buses and mobile homes use a December birth month). If the rate chart indicates annual, half year, and quarter year fee calculations, you must determine the number of months of tax required. To determine the number of months of tax required, start with the month the vehicle was purchased or subject to registration and count through the month prior to the owner's birth month. Three months or less requires the quarter year rate, four to six months requires the half-year rate, and over six requires the full year rate. (Example: You purchased your vehicle in November and your birth month is June, count a total of seven months (November through May) and the full year rate would be required.

II. TRUCKS AND TRAILERS – WEIGHTS

For trucks weighing 5,000 lbs. or less, if the shipping weight is not available on the manufacturer's certificate of origin a certified weight affidavit from a weighing station is required. The gross vehicle weight (GVW) as declared by the owner, is required on all truck-tractors and trucks weighing over 5000 pounds.

For heavy trucks with net weight of 5001-7999 lbs., GVW is calculated by adding the net weight of the truck and the truck's load. For heavy trucks with net weight of 8000 lbs. up and truck-tractors, the GVW is calculated by adding the net weight of the truck or truck-tractor and its load to the net weight of the trailer and its load.

III. INITIAL REGISTRATION FEE

Imposed upon the initial application for registration of private automobiles, trucks 5,000 lbs. or less and motor homes.

The \$225.00 Initial Registration Fee does not apply to:

- A. Any registration renewal transaction.
- B. A transfer or exchange of a registration license plate for a motor vehicle that has been disposed of to a newly acquired motor vehicle in compliance with Sections 320.0609(2) or (5), Florida Statutes.
- C. Any initial registration that occurs when a transfer of Florida title is processed between co-owners as provided by Section 319.22, Florida Statutes, or when a transfer of ownership by operation of law occurs as provided by Section 319.28, Florida Statutes. Additionally, the fee does not apply when the transfer of title occurs from a person to a member of that person's immediate family. Section 657.002, Florida Statutes, defines immediate family as parents, children, spouse, or surviving spouse of the member, or any other relative by blood, marriage, or adoption residing in the same household with the registered owner.
- D. The registration of a motor vehicle owned by and operated exclusively for the personal use of:
 - 1) Any member of the United States Armed Forces, or his/her spouse or dependent child, who is not a resident of this state and who is stationed in this state while in compliance with military orders.
 - 2) Any former member of the United States Armed Forces, or his/her spouse or dependent child, who purchased such motor vehicle while stationed outside of Florida, who has separated from the Armed forces and was not dishonorably discharged or discharged for bad conduct, who was a resident of this state at the time of enlistment and at the time of discharge, and who applies for registration of such motor vehicle within 6 months after discharge.
 - 3) Any member of the United States Armed Forces, or his/her spouse or dependent child, who was a resident of this state at the time of enlistment, who purchased such motor vehicle while stationed outside of Florida, and who is now reassigned by military order to this state.
 - 4) Any spouse or dependent child of a member of the United States Armed forces who loses his life while on active duty or who is listed by the Armed Forces as "missing-in-action." Such spouse or child must be a resident of this state and the serviceman must have been a resident of this state at the time of enlistment. Registration of such motor vehicle must occur within 1 year of the notification of the serviceman's death or of his status as "missing-in-action."
 - 5) Any member of the United States Armed Forces, or his/her spouse or dependent child, who was a resident of this state at the time of enlistment, who purchased a motor vehicle while stationed outside of Florida, and who continues to be stationed outside of Florida.
- E. The registration of any motor vehicle owned or exclusively operated by the state or by any county, municipality, or other governmental entity.
- F. The registration of a truck defined as a "goat", or any other vehicle when used in the field by a farmer or in the woods for the purpose of harvesting a crop, including naval stores, during such harvesting operations, and which is not principally operated upon the roads of this state. The "goats" are registered under "class code 93".
- G. The registration of an automobile or truck defined as "ancient" (the vehicle was manufactured in 1945 or earlier) or "antique" (the vehicle was manufactured beginning 1946 and of the age of 30 years or more after the date of manufacture), pursuant to s. 320.086(1) or (2), Florida Statutes.
- H. The initial registration fee shall not apply to any newly acquired vehicle, upon submission of an affidavit, indicating that the previous vehicle (not disposed of) is not operational, or is in storage, or will not be operated on the streets and highways of this state.

IV. SALES TAX

Florida law requires sales tax to be collected on the purchase price of a motor vehicle, mobile home, or vessel. In the case of a straight sale, six (6) percent tax will be collected on the total purchase price. Straight sales are those sales that do not involve a trade-in of a motor vehicle, mobile home, or vessel.

In the case of sales involving trade-ins, sales tax must be collected on the amount of the cash difference between the retail value of the trade-in, as covered in any official used motor vehicle, mobile home or vessel guide, and the sale price of the motor vehicle, mobile home, or vessel acquired. The trade-in motor vehicle, mobile home, or vessel may be provided by a third party other than the purchaser. The trade-in motor vehicle, mobile home, or vessel does not have to be titled in the name of the purchaser, to be used for trade-in credit, as long as the motor vehicle, mobile home or vessel trade-in and the motor vehicle, mobile home or vessel purchase are part of a single transaction.

In addition to the six (6) percent sales tax, some counties charge a local discretionary sales surtax. Discretionary surtax is calculated on motor vehicles, mobile homes, or vessels when the residence address of the purchaser on the certificate of title or registration is located within a discretionary surtax county. The discretionary sales surtax applies to the first \$5,000 of the sales price. For more information on the discretionary surtax you may contact the Florida Department of Revenue or your Florida County Tax Collector's office.

Sales tax exemption information may be specified on an accurately completed form HSMV 82040, Application for Certificate of Title with/without Vehicle Registration.

CALCULATION OF FEES AND CHECK OFF LIST

ITEMS TO BE COMPLETED BEFORE SUBMITTING (see Tax Collectors Mailing List) YOUR REQUEST:		
1.	Enter the license plate fee from page 1 or 2. NOTE: A biennial registration may be issued by doubling the annual tax. Add both amounts and insert the total in the first space provided. If transferring a valid Florida license plate, see number six (6) below. Add \$28.00 when new metal license plate is to be issued. Add \$225.00 Initial Registration Fee, if applicable (See page 3, III). Add \$.50 branch fee if processing through a county branch office.	\$ _____ \$ _____ \$ _____ \$ _____
2.	Title fee (if applicable), enter \$77.25 for new vehicles (no previous title issued anywhere); \$75.25 for vehicles previously registered in Florida, \$85.25 for vehicles previously registered in another state. <u>Titles are not issued on trailers through 1,999 lbs., mopeds, or motorized bicycles.</u> If processing through a county branch office, add \$.50 branch fee.	\$ _____ \$ _____
3.	If recording a lien, enter \$2.00.	\$ _____
4.	If over 30 days from date of purchase, enter \$20.00 for a motor vehicle, \$10.00 for a vessel or off-highway vehicle.	\$ _____
5.	Enter a \$2.00 lemon law fee if application is for a new vehicle purchased or leased for one year or longer in Florida and is a passenger car or truck with a gross vehicle weight of 10,000 pounds or less (only applies to Florida Dealers and Leasing Companies).	\$ _____
6.	If transferring a valid Florida license plate to a replacement vehicle, enter \$7.35. If additional transfer fee required, enter \$4.50 (any license plate transferred to or from any vehicle other than a passenger automobile or truck under 5,000 lbs. will require a transfer fee in addition to the regular tax and fees indicated above).	\$ _____ \$ _____
7.	Enter mail fee (\$2.95 first class metal license plate; or for renewal decal \$.75).	\$ _____
8.	If sales tax is due, enter amount (refer to page 3, IV). If requesting a dealer license plate, enter annual use tax of \$27.00 per license plate.	\$ _____ \$ _____
9.	If requesting expedited title service: Add \$10.00 additional fee per application.	\$ _____
10.	If you are requesting the actual paper certificate of title to be mailed to you, add \$2.50. If you are requesting the title to be held electronically by the department, there is no fee. <u>This information must be specified in section 1 on your accurately completed form HSMV 82040, Application for Certificate of Title With/Without Registration.</u>	\$ _____
11.	If requesting a Personalized License Plate, enter the additional fee based on license plate type. * See below for more information.	\$ _____
12.	If requesting a Specialty License Plate, enter the additional fee based on license plate type as well as the \$5.00 processing fee. ** See below for more information.	\$ _____
13.	Amount due: Enter total of above lines 1-12.	\$ _____
OWNER'S CHECK OFF LIST (CHECK EACH APPROPRIATE BOX, AFTER COMPLETION:)		
14.	Enter the total from line 13 on your check/money order, made payable to your County Tax Collector.	<input type="checkbox"/>
15.	Proof of insurance enclosed (see attached Florida Insurance Affidavit and Military Insurance Exemption Information).	<input type="checkbox"/>
16.	Proof of ownership (documents will be retained by the Department):	<input type="checkbox"/>
a.)	New Cars: Manufacturer's certificate of origin from all states, except the State of Nevada, which also requires the dealer's report of sale form.	
b.)	Used Cars: (cars already titled/registered in another state): Certificate of title, if from a title state, or registration or other official document showing ownership must be submitted, if from a non-title state or foreign country.	
17.	All required application forms must be accurately completed and signed.	<input type="checkbox"/>

Additional fees are due for a personalized or specialty license plate.

* For Personalized License Plate fee information, see form HSMV 83043, Application for Personalized License Plate:
<http://www.flhsmv.gov/dmv/forms/BTR/83043.pdf>.

** For Specialty License Plate information, visit the following website: <http://www.flhsmv.gov/dmv/specialtytags/>.

YOUR REQUEST WILL BE RETURNED UNPROCESSED, UNLESS YOU HAVE COMPLIED WITH ALL OF THE ABOVE INSTRUCTIONS.

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

FLORIDA INSURANCE AFFIDAVIT

Under penalty of perjury, I _____ certify that I have
(Name of Insured)

Personal Injury Protection, Property Damage Liability, and, when required, Bodily Injury Liability

Insurance currently in effect with _____ under
(Name of Insurance Company)

_____ covering the following motor vehicle:
(Policy Number) Company Code Number (5 digits)

_____ Year Make Vehicle Identification Number

This insurance company is licensed to issue insurance policies in Florida. I understand that my driver license, license plate(s) and registration(s) will be suspended effective from the registration date, if the insurer denies that this policy is in force.

Signature of Insured

WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN A VEHICLE REGISTRATION CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS SUBJECT TO PROSECUTION.

For information on "Discretionary Sales Surtax" (for each applicable county) go to the Department of Revenue's website located at:

<http://dor.myflorida.com/dor/taxes/discretionary.html>

and click on: Form DR-15DSS.

**Affidavit for U.S. Military Service Personnel (Currently Stationed in a State Other Than Florida)
Claiming an Exemption from Florida Sales Tax**

I _____, am a military member who has purchased the
(Name of Military member)
motor vehicle/vessel listed below in _____ while stationed outside of Florida:
(State)

(Year)

(Make of Vehicle/Vessel)

(Vehicle/Vessel identification Number)

I am certifying the following:

- I am a resident of the state of Florida.
- I am currently residing outside of Florida pursuant to military orders.
- The vehicle/vessel will be held outside of Florida for longer than 6 months.
- I will not bring the vehicle/vessel into the state of Florida within 6 months from the date of purchase, even for temporary reasons.
- I recognize that I owe tax to the state in which the motor vehicle was purchased, unless a specific exemption applies.
- I do not intend to avoid sales or use tax in any state by registering the vehicle/vessel in Florida.

I understand that if I fraudulently issue this certificate to evade the payment of sales tax I will be liable for payment of the sales tax plus a penalty of 200% of the tax and may be subject to conviction of a third degree felony.

Under the penalties of perjury, I declare that I have read the foregoing Certificate of Entitlement and the facts stated in it are true.

(Date)

(Signature of Military Member)