

## STATE OF FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

## **DIVISION OF MOTOR VEHICLES**



Neil Kirkman Building, Tallahassee, FL 32399-0500

## STATEMENT OF BUILDER

	CTION I. DESCF	RIPTION OF	☐ MOTOR	VEHICLE	MOTORCYC	CLE   MOE	BILE HOME
1.	Year -	Make	Identifica	ation Number	Color	Body	Length
2.	Title Number: _			Т	itle State:		
3.	Other/Title Numb	oer:		Т	itle State:		
1.	Motor Vehicle/Mo	otorcycle is c	omplete and in	road operab	e condition.		(Initials)
	Mobile Home is I	habitable for	residential or c	ommercial pu	rposes.		(Initials)
	SECTION II	. MAJOR CO	OMPONENT PA	ARTS USED I	N THE BUILDIN	G/REPAIR PRO	CESS
	This section is not applicable as the						
۷.	List the major co please use form			bullding/repal	r process (if add	aitionai space is	needed,
_	Part	New Use	ed Repaired	Aftermarket	Homemade	Source	/VIN
ou ass	te: Major comport mper), cowl assent semblies, engine, ks and fenders), e	nbly, rear bod frame, airbag	ly section (both s, or transmissi	quarter panel on; mobile ho	s, deck lid, bump me - the frame; a	per, and floor par and motorcycle -	n), door
3.	When Section II needed, please major componer	use form HS	MV 84491. Att	ach the origir	al MSO, bill of	sale(s), or receip	ot(s) for all

AND BRAND TITLE AS APPROPRIATE.

SECTION III. APPLICANT IN	FORMATION AND SIGNATURE			
Date:				
The undersigned hereby certifies that the vehicle of Standards.	conforms to Florida and Federal Motor Vehicle Safety			
	AT I HAVE READ THE FOREGOING DOCUMENT AND O MATERIAL INFORMATION REGARDING THE MOTOR S BEEN OMITTED.			
PRINTED NAME OF APPLICANT/BUSINESS	PRINTED NAME OF CO-APPLICANT/BUSINESS			
STREET ADDRESS	STREET ADDRESS			
CITY STATE ZIP	CITY STATE ZIP			
TELEPHONE NUMBER:	TELEPHONE NUMBER:			
SIGNATURE OF APPLICANT/BUSINESS	SIGNATURE OF CO-APPLICANT/BUSINESS			
SECTION IV. I	DMV USE ONLY			
Signature below only attests to DMV inspection and does not ap	ply to verification of Sections I, II, or III, completed by applicant.			
VIN:	Title Number:			
D-1:	Title State: Odometer:			
D-2:	Year: Make:			
D-3:	Body: Color:			
D-4:	Audit #: Region #:			
Please mark the appropriate answer:				
Secondary VIN Verified Yes No	Previous Rebuilt Title Yes No			
Federal Decal Intact Yes No	NICB Check Yes No			
Replacement VIN Plate/Decal  Yes  No	Tax Due On:			
Vehicle Painted Prior to Inspection	Component Parts Marked  Yes  No			
This ASPT/Vehicle resembles a:				
Mobile Home Use Only: Mobile Home was measured	☐ With Tongue or ☐ Without Tongue			
Comments:				
Under penalties of perjury, I declare that I have made ins and completed Section IV based on that inspection.	spection of this motor vehicle, motorcycle, or mobile home			
Signature of Inspector	Inspector's Badge ID Number			
Print Name of Inspector	Date			

HSMV 84490(S) (Rev. 10/08)