STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
AFFIDAVIT FOR GOLF CART MODIFIED TO A LOW SPEED VEHICLE

Florida Assigned FLA VIN: ________________________________

The undersigned hereby certifies that the golf cart modified to a low speed vehicle conforms to Federal Regulations under Title CFR Part 571.500 and 316.2126, Florida Statutes, including but not limited to the following:

- Headlamps
- Stop lamps
- Tail lamps
- Rear license plate bracket with either a tail lamp or a separate lamp constructed and placed to illuminate with a white light the rear registration plate and render it clearly legible from a distance of 50 feet to the rear
- Front and rear turn signal lamps
- Windshield with an AS1 or AS4 composition
- Type 1 or Type 2 seat belt assembly conforming to section 571.209 of this part, Federal Motor Vehicle Safety Standard No. 209, Seat belt assemblies at each designated seating position
- An exterior mirror mounted on the driver’s side of the vehicle and either an exterior mirror mounted on the passenger’s side of the vehicle or an interior mirror
- Parking Brakes
- Reflex reflectors: one red on each side as far to the rear as practicable, and one red on the rear
- Windshield cleaning device pursuant to 316.2952(3)(4), Florida Statutes
- Horn pursuant to 316.271(1), Florida Statutes
- Slow Moving Vehicle Emblem (SMV) pursuant to 316.2225(7)(a)(b), Florida Statutes
- Top speed is greater than 20 MPH but not greater than 25 MPH pursuant to 320.01(42), Florida Statutes (it can be gasoline or electrical/battery powered)
- Requirement of a weight slip (The Gross Vehicle Weight Rating cannot exceed 3,000 lbs. The GVWR includes the net weight of the vehicle, plus the rated cargo load, plus 150 lbs. times the number of seating positions equipped with seat belts)

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE. FURTHER, I AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS.

SIGNATURE OF APPLICANT (OWNER) ________________________________
SIGNATURE OF APPLICANT (CO-OWNER) ________________________________

PRINTED NAME OF APPLICANT (OWNER) ________________________________
PRINTED NAME OF APPLICANT (CO-OWNER) ________________________________

DATE: ________________________________
DATE: ________________________________

HSMV 86064 (Rev. 09/12)
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/otives/

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.

Owner
Are you a Florida resident?
yes [ ] no [ ]

Co-Owner
 Are you an alien?
yes [ ] no [ ]

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 #

Owner's Mailing Address (Mandatory unless a member of the Military)
City
State
Zip

Owner's Mailing Address (Mandatory unless a member of the Military)
City
State
Zip

Owner's Physical Street Address In Florida (Mandatory unless a member of the Military)
City
State
Zip

Mobile Home Physical Address (if applicable)

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

FLA

Previous State of Issue
License Plate or Vessel Registration Number
Weight
Length
FT. IN.

Type

Open Motorboat
Houseboat
Personal Watercraft

 open
Houseboat
Personal Watercraft

 Hull Material

Wood
Aluminum

 Outboard
Salvage

 Fuel
Gas

 Hull Color

Hull Number
Inboard
Outboard/Outboard

 Other
Other

 Propulsion

Outboard
Salvage

 F F

 Draft of Vessel

For all vessels 76' or more in length and all sailboats

 Previous Out-Of-State Registration Number

3 BRANDS, USAGE AND TYPE (Check Applicable Boxes)

Use of Vessel

Recreational (pleasure)

 Deake/Manuf.

 Commercial Fishing

 Commercial Live Bait

 Commercial Shrimp Rustic

 Commercial Shrimp Non-Rustic

 Commercial Oyster

 Commercial Sipley Lobster

4 LIENHOLDER INFORMATION

Lienholder

Lienholder's Name

Lienholder's Address
City
State
Zip

If Lienholder authorizes the Department to send the motor vehicle or mobile home title to the owner, check box and counter sign.

(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?

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 provide all the information may result in fines or imprisonment.

We state that this [ ] 5 or [ ] 6 Digit Odometer Now Reads

XX [NO TENTHS] MILES, DATE READ [ / / ] AND WE HEREBY CERTIFY THAT TO THE BEST OF MY/KNOWLEDGE THE ODOMETER READS:

1. Reflects Actual Mileage:
2. Is in Excess of Its Mechanical Limits
3. Is Not the Actual Mileage:

7 DEALER SALE/TRADE 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

HSMV 82040 – REV. 12/12

www.flhsmv.gov
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 1986 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 ABRUPTION OF "TT" 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)

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 ____________________________

SALES TAX REGISTRATION NUMBER ___________________________________________

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

☐ 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: __________________________________________

REPOSSESSION DECLARATION

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

☐ I CERTIFY THAT THIS MOTOR VEHICLE, MOBILE HOME OR VESSEL WAS REPOSESSSED UPON DEFAULT IN THE TERMS OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.

☐ 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.

☐ 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: __________________________________________

APPLICATION ATTESTMENT AND SIGNATURES

WE PHYSICALLY INSPECTED THE COMPLETION 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 ____________________________

RELEASE OF SPOUSE OR HEIRS INTEREST

The undersigned person(s) state(s) as follows: That ____________________________ died on ____________________________.

☐ 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.

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 above stated 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

HSMV 82040 – REV. 12/12
STATEMENT OF BUILDER

☐ REBUILT ☑ ASPT ☐ KIT CAR ☐ OTHER: 

SECTION I. DESCRIPTION OF ☑ MOTORVEHICLE ☐ MOTORCYCLE ☐ MOBILE HOME

1. Year Make Identification Number Color Body Length

2. Title Number: __________________________ Title State: __________________________

3. Other/Title Number: __________________________ Title State: __________________________

4. Motor Vehicle/Motorcycle is complete and in road operable condition. _________ (Initials)

Mobile Home is habitable for residential or commercial purposes. _________ (Initials)

SECTION II. MAJOR COMPONENT PARTS USED IN THE BUILDING/REPAIR PROCESS

Note: Major component parts defined as: For motor vehicles other than motorcycles, any fender, hood, bumper, cowl assembly, rear quarter panel, trunk lid, door, deck lid, floor pan, engine, frame, transmission, catalytic converter or airbag.

1. This section is not applicable as the ☐ Motor Vehicle ☐ Motorcycle or ☐ Mobile Home was purchased from __________________________ on __________________________, in complete rebuilt or ASPT condition.

2. List the major component parts used in the building/repair process (if additional space is needed, please use form HSMV 84491).

<table>
<thead>
<tr>
<th>Part</th>
<th>New</th>
<th>Used</th>
<th>Repaired</th>
<th>Aftermarket</th>
<th>Homemade</th>
<th>Source/VIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>CART</td>
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<td>LIGHTS</td>
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<td>WINDSHIELD</td>
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<td>SEAT BELTS</td>
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<tr>
<td>MIRRORS</td>
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</tbody>
</table>

3. When Section II (1) is not applicable, describe the repairs made in detail. (If additional space is needed, please use form HSMV 84491. Attach the original MSO, bill of sale(s), or receipt(s) for all major component parts (must contain name, address, telephone, and signature of seller). ____________________________________________________________

4. Number of Receipts: __________

SECTION III. CUSTOM VEHICLE OR STREET ROD

The following statements are required to be attested to according to section 320.0863, Florida Statutes. Failure to attest to these statements will cause this agency to reject your application.

☐ The vehicle will not be used for general daily transportation but will be maintained for occasional transportation, exhibitions, club activities, parades, tours, or other functions of public interest and similar uses.

☐ The vehicle meets state equipment and safety requirements for motor vehicles that were in effect in this state as a condition of sale in the year listed as the model year on the certificate of title.

By checking the boxes above and by signature below, I acknowledge and attest to the statements above as my written statement relating to a custom vehicle or street rod.

Signature __________________________ Date __________

HSMV 84490 (Rev. 08/11)
SECTION IV. APPLICANT INFORMATION AND SIGNATURE

Date: ____________________________

The undersigned hereby certifies that the vehicle conforms to Florida and Federal Motor Vehicle Safety Standards. UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS PROVIDED HEREIN ARE TRUE. NO MATERIAL INFORMATION REGARDING THE MOTOR VEHICLE, MOTORCYCLE, OR MOBILE HOME HAS BEEN OMITTED.

<table>
<thead>
<tr>
<th>PRINTED NAME OF APPLICANT/BUSINESS</th>
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<tr>
<td>STREET ADDRESS</td>
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<td>CITY</td>
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<td>TELEPHONE NUMBER:</td>
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</table>

SECTION V. OFFICE USE ONLY

Signature below only attests to the inspection and does not apply to verification of Sections I, II, III or IV 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

Federal Decal: □ Yes □ No

Replacement VIN Plate/Decal: □ Yes □ No

Vehicle Painted Prior to Inspection: □ Yes □ No

This ASPT/Vehicle resembles a: ____________________________

Mobile Home Use Only: ☐ Mobile Home was measured

Comments: ____________________________

☐ With Tongue ☐ Without Tongue

Under penalties of perjury, I declare that I have made inspection of this motor vehicle, motorcycle, or mobile home and completed Section V based on that inspection.

__________ Signature of Inspector

__________ Print Name of Inspector

__________ Date

HSMV 84490 (Rev. 08/11)
STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

STATEMENT OF BUILDER
(Additional Sheet)

☐ REBUILT ☑ ASPT ☐ COMBINED ☐ KIT CAR ☐ OTHER: ____________________________

SECTION I. Description of: ☐ MOTOR VEHICLE ☐ MOTORCYCLE ☐ MOBILE HOME
1. ____________________________
   Year Make Identification Number Color Body Length

SECTION II. MAJOR COMPONENT PARTS USED IN THE BUILDING/REPAIR PROCESS

2. Please continue to list the major component parts used in the building/repair process.

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<td>WIPERS</td>
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<td>HORN</td>
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<td>SMV EMBLEM</td>
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NOTE: Major component parts defined as: For motor vehicles other than motorcycles, any fender, hood, bumper, cowl assembly, rear quarter panel, trunk lid, door, deck lid, floor pan, engine, frame, transmission, catalytic converter or airbag.

HSMV 84491 (Rev. 8/11)
3. Please continue to describe any repairs made.

__________________________________________________________________________

__________________________________________________________________________

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SECTION III. TO BE COMPLETED AND SUBMITTED WITH ALL APPLICATIONS

Date: ________________

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN THIS APPLICATION REGARDING THE MOTORVEHICLE, MOTORCYCLE, OR MOBILE HOME HAS BEEN OMITTED.

PRINTED NAME OF APPLICANT/BUSINESS ____________________________

PRINTED NAME OF CO-APPLICANT/BUSINESS ____________________________

SIGNATURE OF APPLICANT/BUSINESS ____________________________

SIGNATURE OF CO-APPLICANT/BUSINESS ____________________________

HSMV 84491 (Rev. 8/11)