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/

Notice of Sale and/or Bill of Sale for a Motor Vehicle, Mobile Home, Off-Highway Vehicle or Vessel

☐ Notice of Sale (Seller must complete sections 1 & 3). The purchaser's signature in section 3 is optional.

☐ Bill of Sale (Seller and purchaser must complete sections 1, 2 (when applicable) & 3).

1. Motor Vehicle, Mobile Home, Off- Highway or Vessel Description

Year	Make/Manufacturer	Body Type	Model	Color

Certificate of Title Number	Vehicle/Vessel Identification Number

I/we do hereby sell or have sold and delivered the above described motor vehicle, mobile home, off-highway vehicle or vessel to:

Print Name(s) of Purchaser(s)			
Address	**City**	**State**	**Zip Code**

Date of Sale	Selling price $

2. Odometer Disclosure Statement (Required For a Motor Vehicle)

Federal and State law requires that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

WE STATE THAT THIS MOTOR VEHICLE'S ☐ 5 DIGIT OR ☐ 6 DIGIT ODOMETER NOW READS ☐☐☐,☐☐☐.xx (NO TENTHS) MILES, DATE READ _____/_____/_____, AND WE HEREBY CERTIFY THAT TO THE BEST OF OUR KNOWLEDGE THE ODOMETER READING:

☐ **1.** REFLECTS THE **ACTUAL MILEAGE**. ☐ **2.** IS **IN EXCESS OF ITS MECHANICAL LIMITS.** ☐ **3.** IS **NOT THE ACTUAL MILEAGE.**

Affidavit (When applicable):

3. Certification

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

Seller's Signature	Seller's Printed Name	Date
Seller's Address	**City** / **State**	**Zip Code**
Co-Seller's Signature (when applicable)	**Co-Seller's Printed Name (when applicable)**	**Date**
Co-Seller's Address (when applicable)	**City** / **State**	**Zip Code**
Purchaser's Signature	**Purchaser's Printed Name**	**Date**
Co-Purchaser's Signature (when applicable)	**Co-Purchaser's Printed name (when applicable)**	**Date**

✱ **OWNERSHIP STATUS FOR THE ABOVE DESCRIBED MOTOR VEHICLE, MOBILE HOME, OFF-HIGHWAY VEHICLE OR VESSEL WILL NOT CHANGE UNTIL THE PURCHASER APPLIES FOR AND IS ISSUED A CERTIFICATE OF TITLE.**

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