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MISCELLANEOUS AFFIDAVIT

This is to certify that on the following vehicle/vessel/mobile home/trailer:

Year	Make	Identification Number	Title Number	Plate / FL Number
_____	_____	_____	_____	_____

_____ The correct purchaser is _____, for the price of \$ _____, purchased on the following date _____.
The name _____ was put on the title as purchaser in error.

_____ The vehicle listed above was continuously maintained in dead storage and was not operated at any time during the previous registration period (s).

_____ The names _____ and _____ are one and the same person.

_____ The following license plate number _____ is Lost/Destroyed/Stolen. Therefore, the license plate is not available for surrender. If this license plate is found, it will not be affixed to any motor vehicle.

_____ The above described Off-Highway vehicle is used exclusively on a farm or in a forest for agricultural purposes and therefore is exempt from sales tax, pursuant to s. 212.08(3), Florida Statutes.

_____ The above described vessel has never been titled or registered in Florida or any other state.

_____ If a motor vehicle, mobile home or vessel was purchased in a foreign country, six percent Florida sales or use tax and local discretionary sales surtax is required to be paid before a certificate of title and registration can be issued. The amount upon which the tax is applied is the fair market value on date of entry. No credit is allowed for any sales or use tax paid to a foreign country. (DMV TL-08). Motor vehicles that are given as gifts from individual from foreign countries are taxable when brought in to Florida and registered. The six-month rule and the gift rule do not apply. The tax should be computed on the fair market value. (DOR Tax info for Tax Collectors 02/08 p6).
I declare the Fair market value to be \$ _____.

_____ Other: _____

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

Signed _____ Printed Name _____ Date _____

Signed _____ Printed Name _____ Date _____