

**State of Florida**  
**Department of Highway Safety and Motor Vehicles**

**Dealer Plates for Heavy Trucks for Demonstration Purposes**

**Dealership Information:**

Name of Dealership: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Dealer License Number: \_\_\_\_\_

**Driver Information:**

Name of Driver: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Driver License Number: \_\_\_\_\_

Dealer License Plate Number: \_\_\_\_\_

Vehicle Identification Number: \_\_\_\_\_

Date & Time Demonstration Started: \_\_\_\_\_

Date & Time Demonstration Ended: \_\_\_\_\_

Total Number of Hours: \_\_\_\_\_

(Not to exceed 24 consecutive hours)

Signature of Driver: \_\_\_\_\_

Name of Dealer Representative: \_\_\_\_\_

Signature of Dealer Representative: \_\_\_\_\_

“Under penalty of perjury, I do swear or affirm that all the information contained in this application is true and correct.”

\_\_\_\_\_  
Signature of Dealer Principal/Officer

\_\_\_\_\_  
Typed Name and Title