

FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

REASSIGNMENT DOCUMENT FOR AN ELECTRONIC CERTIFICATE OF TITLE

THIS FORM MAY BE USED WHEN ALL OF THE FOLLOWING APPLY:

- The certificate of title is being held electronically.
- The vehicle is exempt from odometer requirements (See DMS Procedure TL-09 for clarification).
- An individual(s) seller wants to transfer their electronic title to a purchaser.
- The purchaser agrees to allow the title to remain electronic upon transfer.
- Seller and purchaser go to their local tax collector's office or license plate agency to facilitate the transfer.
- This form is completed and signed prior to the agency processing the title transfer.

NOTE: If the vehicle described below is not exempt from odometer requirements, the buyer and seller must complete the reassignment form HSMV 82994 in lieu of this form.

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		
2. Certification				
I/we do hereby certify that I/we have an electronic title for the above described motor vehicle, mobile home, off-highway vehicle or vessel. I/we have sold this vehicle/mobile home/vessel to the person(s) named below and wish to transfer my/our interest to him/her. He/she agrees to maintain the title electronically.				
Print Name(s) of Purchaser and Co-Purchaser (if applicable)				
Date of Sale		Selling price \$		
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
Co-Seller's Signature (if applicable)		Co-Seller's Printed Name (if applicable)		Date
Purchaser's Signature		Purchaser's Printed Name		Date
Purchaser's FL Driver License/ID #		Purchaser's Date of Birth (DOB)		Purchaser's Sex
Purchaser's Address				
Street Address			City	State Zip Code
Co-Purchaser's Signature (if applicable)		Co-Purchaser's Printed name (if applicable)		Date
Co-Purchaser's FL Driver License/ID # (if applicable)		Co-Purchaser's Date of Birth (DOB)		Co-Purchaser's Sex
Co-Purchaser's Address (if applicable)				
Street Address			City	State Zip Code