



APPLICATION FOR CERTIFICATE OF VESSEL TITLE

Please submit this form to your local tax collector office or license plate agency.

http://www.flhsmv.gov/locations/

Note: All fields are required unless otherwise stated or not applicable.

Application Type: Original Transfer

Request to print Certificate of Title: No Yes: In office Yes: Mailed

Section 1: OWNER/APPLICANT INFORMATION

Form section for owner/applcant information including fields for Customer Number, Fleet Number, Unit Number, Owner's County of Residence, Owner Details, and Co-Owner Details.

Section 2: VESSEL DESCRIPTION

Form section for vessel description including fields for Hull Identification Number (HIN), Florida Title Number, FL/DO Number, Make/Manufacturer, Model, Year, Weight, Length, Draft of Vessel, and Vessel Type.

Section 3: OUT-OF-STATE/OUT-OF-COUNTRY CERTIFICATION

Form section for out-of-state/out-of-country certification including fields for Previous State of Issue and Previous Registration Number.

Section 4: DOCUMENTED/FOREIGN-DOCUMENTED VESSEL CERTIFICATION

Form section for documented/foreign-documented vessel certification including a statement of certification and options for documentation.



FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

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**Section 5: LIENHOLDER INFORMATION (If applicable)**

ELT Customer <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> FEID/Suffix # <input type="checkbox"/> DMV Account # <input type="checkbox"/> DL/ID #, Sex and DOB	Lienholder's Phone Number (Voluntary)	Lienholder's Email (Voluntary)	
Date of Lien	Lienholder's Mailing Address	City	State	Zip Code
Lienholder's Name (If box is not checked, title will be mailed to the first lienholder.)		<input type="checkbox"/> Check this box if you, lienholder representative, authorize the Department to send the vessel title to the owner and sign here: _____		

**Section 6: SECURITY INTEREST**

I certify that the vessel listed above has security interests. (More than one form HSMV 82040 may be used for additional secured parties.)

Secured Party's Name	Secured Party's Mailing Address	City	State	Zip Code
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**Section 7: TRANSFER TYPE (If applicable)**

If ownership has transferred, how and when was the vessel acquired?  Inheritance  Sale (Price: \$ \_\_\_\_\_ . \_\_\_\_ )  Gift  Repossession  Court Order  Other (Specify): \_\_\_\_\_

Date Acquired: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Section 8: DEALER SALES TAX REPORT AND VESSEL TRADE IN INFORMATION (If applicable)**

Florida Sales Tax Registration Number	Dealer License Number	Date of Sale	Amount of Tax	Dealer/Agent Signature
Year of Trade In	Make of Trade In	Title Number of Trade In (If known)	Vessel Identification Number of Trade In	

**Section 9: SALES TAX EXEMPTION CERTIFICATION (If applicable)**

**I certify the recreational 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  Vessel will be used exclusively for rental.

Consumer's Certificate of Exemption Number: \_\_\_\_\_ Sales Tax Registration Number: \_\_\_\_\_

I hereby certify that ownership of the vessel described on this application, is not subject to Florida Sales and Use Tax for the following reason:

Inheritance  Gift  Divorce Decree  Transfer between a married couple  Other: \_\_\_\_\_

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.)

**Section 10: REPOSESSION DECLARATION**

I certify that this vessel was repossessed upon default in the terms of the lien instrument and is now in my possession.

**Section 11: 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 vessel identified will not be operated on the waters of this state until properly registered.

Other: (explain) \_\_\_\_\_

**Section 12: APPLICATION ATTESTMENT AND SIGNATURES**

**I/We physically inspected the HIN.** (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.**

Full Name of Applicant, Owner	Signature of Applicant, Owner	Date
Full Name of Applicant, Co-Owner	Signature of Applicant, Co-Owner	Date

**Section 13: RELEASE OF SPOUSE OR HEIRS INTEREST (If applicable)**

The undersigned person(s) state(s) that \_\_\_\_\_ died on \_\_\_\_\_.

(Name of deceased) (Date)

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.**  
(More than one form HSMV 82040 may be used for additional signatures.)

Full Name of <input type="checkbox"/> Spouse, <input type="checkbox"/> Co-Owner or <input type="checkbox"/> Heir(s)	Signature of Spouse, Co-Owner or Heir(s)	Date
Full Name of <input type="checkbox"/> Spouse, <input type="checkbox"/> Co-Owner or <input type="checkbox"/> Heir(s)	Signature of Spouse, Co-Owner or Heir(s)	Date

**That at the time of death the decedent was owner of the 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 aforesaid vessel to:**

Full Name of Applicant	Signature of Applicant	Date
Full Name of Applicant	Signature of Applicant	Date