State of Florida, County of ____________________________

Before me, the undersigned Notary Public, personally appeared _____________________________________________________________ ,

Who, being duly sworn, says that he/she is a resident of the State of ____________________________ and that he/she is the purchaser of the following described motor vehicle.

Name of Purchaser __________________________________________________________________________________________________

State of Residence and Address of Purchaser ________________________________________________________________________________

(Street) (City) (State) (ZIP)

Affidavit for Partial Exemption of Motor Vehicle Sold for Licensing in Another State

DR-123

Sworn to (or affirmed) and subscribed before me this _____________ day of _________, A.D., ________.

______________________________________________ __________________________________________

(Signature of Nonresident Purchaser) (Signature of Notary)

Personally Known _________________________ Or Produced Identification ____________________________

Type of Identification Produced ____________________________ Print, Type or Stamp Name of Notary

If the non-resident purchaser is a corporation or partnership, an officer or partner must acknowledge the following in order to be allowed the partial exemption:

- The vehicle will be removed from this state within 45 days of purchase and will remain outside this state for a minimum of 180 days.
- OR

If the vehicle is not removed from this state, an officer or partner in the non-resident corporation or partnership must certify the following:

- There is no officer that is a resident of this state.
- There is no stockholder who owns at least 10% of the corporation that is a resident of this state.
- There is no partner in the partnership who has at least 10 percent ownership of the partnership that is a resident of this state.

Name of Seller ________________________________________________________________________________________________________

Address of Seller ______________________________________________________________________________________________________

(Street) (City) (State) (ZIP)

Seller's Sales Tax Registration Number ___________________________________________________________________________________

Date of Sale ________________________________________________________________________________

Description of Motor Vehicle:

Make___________________________________________ Model__________________________________________ Year__________________

Vehicle Identification Number ____________________________ Motor Number ____________________________

Sales Price ____________________________ Trade-In Allowance ____________________________

Sales Tax Paid to the STATE OF FLORIDA $ ____________________________

I, ______________________________________ understand that I may owe sales tax to the State of ____________________________:

(Purchaser’s Initials) (Purchaser’s state - Do Not Abreviate)

- If the state, in which the vehicle is being registered/licensed, does not allow a credit for sales tax paid to the State of Florida; or
- If that state imposes a rate higher than 6 percent.

I also understand:

- sales tax is being paid to Florida and not to any other state; and
- I may request a copy of the "Motor Vehicle Sales Tax Rates by State" from the above motor vehicle dealer or the Florida Department of Revenue.

This vehicle will be licensed in the State of ____________________________ within forty-five (45) days after the date it was purchased in the State of Florida.

Sworn to (or affirmed) and subscribed before me this _____________ day of ____________, A.D., _____________.

______________________________________________ __________________________________________

(Signature of Nonresident Purchaser) (Signature of Notary)

www.FloridaSalesTax.com