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**APPLICATION FOR AN ORIGINAL/DUPLICATE
DERELICT MOTOR VEHICLE CERTIFICATE AND REQUEST TO CANCEL TITLE**

This form must be used by the owner/seller of a derelict motor vehicle/trailer who is arranging for the delivery and/or sale of the derelict motor vehicle/trailer to a licensed salvage motor vehicle dealer or a registered secondary metals recycler when the title, salvage title or certificate of destruction is not available. The derelict motor vehicle must be worth less than \$1,000 or the derelict trailer (TL) must be worth less than \$5,000 and must be at least ten model years old (count model year as year one). This form may also be used to apply for a duplicate Derelict Certificate.

VEHICLE/TRAILER MAY NEVER BE TITLED AGAIN AND MUST BE DISMANTLED OR SCRAPPED.

SECTIONS 1, 2, AND 3 SHOULD BE COMPLETED IF APPLYING FOR AN ORIGINAL DERELICT CERTIFICATE.

SECTION 1 SHOULD BE COMPLETED BY THE SALVAGE DEALER/RECYCLER, IF APPLYING FOR A DUPLICATE DERELICT CERTIFICATE.

Check One:

ORIGINAL

DUPLICATE

SECTION 1

Owner must complete this section:

VIN:	Year:	Make:	Body:	Color:	Purchase Price:
Name of Owner/Seller:		Owner/Seller's Driver License/ID Card Number and State of Issue: (Legible copy must be attached.)			
Address of Owner/Seller:					<p align="center">THUMB PRINT SECTION</p> <p>If the seller is not the owner of record of the above described vehicle, the licensed salvage dealer or registered secondary metals recycler at the time of sale must obtain a smudge-free right thumb print or other digit if the seller has no right thumb.</p>
I certify that I am the owner/seller of the derelict vehicle/trailer described above and the title, salvage title, or certificate of destruction is not available. I certify that this vehicle is either a motor vehicle (worth less than \$1,000) or a trailer (worth less than \$5,000) which is at least ten model years old, (required under s. 319.30, Florida Statutes). I certify that there are no undisclosed liens against this vehicle. If I am the seller, I further attest that possession of the motor vehicle/trailer was obtained through lawful means along with ownership rights. I understand this statement will be filed with the Florida Department of Highway Safety and Motor Vehicles and I am authorizing my title record to be cancelled preventing this vehicle/trailer from ever being titled again.					
I hereby authorize _____ of _____ (Print Name of Driver) (Print name of Transporter Business) to act on my behalf and transport the vehicle described above to a licensed salvage motor vehicle dealer or registered secondary metals recycler.					
Under Penalties of Perjury, I Declare That I Have Read The Foregoing Document and That The Facts Stated In It Are True.					
Signature(s) of Owner(s):					Date:

SECTION 2

This section must be completed by the transporter being hired to transport the vehicle for the owner/seller to a licensed salvage motor vehicle dealer or secondary metals recycler and cannot be used for a vehicle being towed from private property for third parties or being purchased by towing operators. If the owner/seller or the salvage motor vehicle dealer or secondary metals recycler transports the motor vehicle/trailer in lieu of a transporter, this section may be left blank.

Transporter (when applicable) must complete this section:

Location of Pickup:	
Name of Company or Person Transporting:	
Name of Driver Transporting:	Florida DL Number of Person Transporting:
I certify the owner/seller of the vehicle described above provided proper personal identification, completed section one of this form and signed the form in my presence when I picked the vehicle up at the above location.	
Under Penalties of Perjury, I Declare That I Have Read The Foregoing Document and That The Facts Stated In It Are True.	
Signature of Transporter	Date:
Printed Name:	Person's Business Title:

SECTION 3

The licensed salvage motor vehicle dealer or registered secondary metals recycler must complete this section:

Name of Business Acquiring the Vehicle:	
Licensed Salvage Motor Vehicle Dealer License Number or Secondary Metals Recycler's Registration Number:	Licensed Salvage Motor Vehicle or Secondary Metals Recycler's E-mail Address:
I am notifying the Florida Department of Highway Safety and Motor Vehicles, as required by law, within 24 hrs. (excluding weekends/holidays) of receiving the derelict motor vehicle/trailer by delivering this completed form to a tax collector's office/license plate agency. I certify that I paid less than \$1,000 for the motor vehicle or less than \$5,000 for the trailer described in this application and agree to hold the motor vehicle/trailer for three (3) business days (excluding weekends/holidays) after the Derelict Certificate is issued before dismantling or destruction. I acknowledge it is a punishable felony of the third degree, as provided in s. 775.082, 775.083 or 775.084, Florida Statutes, if this statement contains false information.	
Under Penalties of Perjury, I Declare That I Have Read The Foregoing Document and That The Facts Stated In It Are True.	
Signature of Buyer:	Date:
Printed Name:	Person's Business Title:

Check your local phone book government pages or visit the following website for current mailing addresses: <http://www.flhsmv.gov/offices/>