

# MILITARY AFFIDAVIT

State of Florida

Manatee County

Vehicle/Hull Identification Number	Year	Make	Body	Title Number
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Check each appropriate statement:

- Military Insurance Exemption Affidavit** - I certify that I am a Florida resident in the military (including the dependent spouse) currently stationed outside of Florida and I am the owner, co-owner or registrant of the vehicle referenced above.

All of the following are required when claiming this exemption:

- (1) An out-of-state mailing address (which will be shown on the registration) for the military member or dependent spouse
- (2) The military member's Florida address of residence (which will be shown in the DMV database)
- (3) A copy of the military orders OR an affidavit from the military member's commanding officer that confirms the member's military orders and the date of assignment (see below)
- (4) The following insurance affidavit:

### MILITARY MEMBER INSURANCE AFFIDAVIT

I certify that my vehicle is maintained in the state of \_\_\_\_\_, where I am on military orders and will not be driven in the state of Florida, except in a transient visitor status. I also declare that I have  **Personal Injury Protection** and  **Property Damage Liability** on the vehicle referenced above, currently in effect with:

Insurance Company Name / Agent	Policy Number / Binder Number
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- Sales Tax Exemption** - I am a permanent Florida resident stationed outside of Florida. I have purchased the vehicle described above in another state (not another country) and I am applying to title and register the vehicle in Florida. The vehicle will not be brought into Florida for six (6) months or longer. I understand that if I fraudulently claim this exemption to evade the payment of sales tax, I will be liable for payment of the sales tax plus a penalty of 200% of the tax and subject to conviction of a third degree felony. \*\* A copy of my military orders is attached. \*\*
- I certify that I have been a resident of the State of Florida continuously for the preceding 5 years.
- I hereby attest that I continue to be eligible for a  **Disabled Veteran**,  **Disabled Veteran Wheelchair** or  **Paralyzed Veterans of America** license plate and I am therefore able to renew my existing registration.
- Other: \_\_\_\_\_

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true. I understand that a person who knowingly makes a false declaration is guilty of the crime of *perjury by false written declaration*, a **felony** of the third degree, punishable as provided in s. 775.082, s. 775.083 or s. 755.084.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Affiant's Signature

\_\_\_\_\_  
Affiant's Printed Name

**Statement of Commanding Officer** - I attest that I am the commanding officer of

\_\_\_\_\_  
Printed Name of Military Member

The military member named above is/was serving on active duty in \_\_\_\_\_,  
City

\_\_\_\_\_ during the time period of  
State/Country

\_\_\_\_\_ thru \_\_\_\_\_  
Start Date End Date

\_\_\_\_\_  
Signature of Commanding Officer

\_\_\_\_\_  
Printed Name of Commanding Officer