

Instructions to complete Application for Duplicate Title by Mail

Name: _____

Phone number: _____

Email address: _____

Required documentation:

- Form HSMV 82101, Application for Duplicate Title Certificate, accurately completed by the applicant.
- Proof of address change (if applicable)-See page 2 of application for acceptable proof.
- Lien satisfaction (if applicable)

***Note: Used cars 10 years or newer require the odometer and the date read to be disclosed on the application for duplicate title.**

If you choose to exempt the odometer reading on a vehicle that is more than 10 years old, write the word exempt in the boxes where the odometer reading would be disclosed.

Please note: Customer **must currently have or previously had** a Manatee County address in order for our office to process the application for duplicate title. Proof must be submitted.

Identification requirements:

All individual(s) must submit a copy of one of the following with the application for duplicate title:

- A driver license or ID card w/photo issued by any US state or territory (Florida driver license must indicate a Manatee County address).
- A Canadian driver license or ID card
- A US passport
- An out-of-country passport

****If transaction is being completed by a Power of Attorney a copy of the driver license for both the applicant and the person appointed power of attorney is required.***

Completing the application:

- If your mailing address will only be temporary, please indicate on the application so that all your records are not changed to that address.
- If there is more than one owner on the title and the names are joined by "and", the application must be signed by **all** owners of record.
- Current odometer reading and date read is required for vehicles 10 years or newer.
 - **A duplicate title with transfer is not permitted by mail.**
 - **An expedited "fast" title will not be issued by mail.**

Fees:

- Motor Vehicle/Motor Home/Travel Trailer-**\$78.25**
- Vessel-**\$9.00**
- Lost in Transit-Never received title from Tallahassee-**\$2.50** if duplicate applied for **within 180 days** of issue date. (After 180 days, duplicate title fee applies.)

Mail check or money order payable to Ken Burton Jr., Tax Collector (U.S. funds only), application for duplicate title and instruction page with contact information provided to the following address: PO Box 25300, Bradenton, FL 34206.

Our office will process your request for a regular duplicate title within 10 business days provided there are no errors or omissions on the paperwork. Your title will be mailed from Tallahassee in approximately 30 days. All paperwork is processed in the order it is received.

If you have questions, please contact our office at (941) 741-4800 or by email at contactcenter@taxcollector.com.

**Proof of Manatee County
residency must be submitted**

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTOR VEHICLES
2900 Apalachee Parkway, MS# 72,
Neil Kirkman Building - Tallahassee, FL 32399

Ken Burton Jr., Tax Collector
PO Box 25300
Bradenton, FL 34206
www.taxcollector.com

**APPLICATION FOR DUPLICATE OR LOST IN TRANSIT/REASSIGNMENT FOR A
MOTOR VEHICLE, MOBILE HOME OR VESSEL TITLE CERTIFICATE**

1 TYPE OF APPLICATION										
<input type="checkbox"/> VEHICLE/VESSEL DUPLICATE: (Fee Required)		<input type="checkbox"/> VEHICLE/VESSEL LOST IN TRANSIT: NOTE: No fee required if vehicle application is made within 180 days from last title issuance date and has been lost in mailing.			<input type="checkbox"/> VEHICLE/VESSEL DUPLICATE WITH TRANSFER: (Both parties must be present for this transaction)					
<input type="checkbox"/> LOST <input type="checkbox"/> STOLEN					<input type="checkbox"/> OR <input type="checkbox"/> AND NOTE: When joint ownership, please indicate if "or" or "and" is to be shown on the title when issued. If neither box is checked, the title will be issued with "and".					
<input type="checkbox"/> Damaged (Certificate of Title must be submitted)										
NOTE: An indication of lost, stolen or damaged is required										
OWNER'S NAME (Last, First, Middle Initial)				Owner's E-Mail Address			PURCHASER'S NAME (Last, First, Middle Initial)		Purchaser's E-Mail Address	
CO-OWNER'S NAME (Last, First, Middle Initial)				Co-Owner's E-Mail Address			CO-PURCHASER'S NAME (Last, First, Middle Initial)		Co-Purchaser's E-Mail Address	
OWNER'S MAILING ADDRESS					PURCHASER'S MAILING ADDRESS					
CITY			STATE		ZIP		CITY		STATE	ZIP
CAUTION: IF ADDRESS DIFFERS FROM DMV RECORDS, ADDRESS VERIFICATION MUST BE SUBMITTED						DATE OF BIRTH		PURCHASER'S DL/ID #		CO-PURCHASER'S DL/ID#

2 APPLICATION FOR DUPLICATE IS MADE BY:									
<input type="checkbox"/> OWNER		<input type="checkbox"/> LIENHOLDER DATE OF LIEN _____			<input type="checkbox"/> MOTOR VEHICLE, MOBILE HOME OR RECREATIONAL VEHICLE DEALER/ AUCTION LICENSE NUMBER (DEALER/AUCTION LICENSE NUMBER DOES NOT APPLY TO VESSELS) _____ LIENHOLDER OR DEALER/AUCTION NAME: _____				
ADDRESS _____ CITY _____ STATE _____ ZIP _____									

3 MOTOR VEHICLE, MOBILE HOME OR VESSEL DESCRIPTION									
Vehicle/Vessel Identification Number		Make/Manufacturer		Year	Body	Color	License Plate or Vessel Registration Number		Florida Title Number

4 VEHICLE USAGE/BRANDS									
<input type="checkbox"/> SHORT TERM LEASE	<input type="checkbox"/> LONG TERM LEASE	<input type="checkbox"/> POLICE VEHICLE		<input type="checkbox"/> PRIVATE USE		<input type="checkbox"/> TAXI CAB	<input type="checkbox"/> FLOOD VEHICLE		
<input type="checkbox"/> REPLICA	<input type="checkbox"/> KIT CAR	<input type="checkbox"/> GLIDER KIT	<input type="checkbox"/> REBUILT		<input type="checkbox"/> ASSEMBLED FROM PARTS		<input type="checkbox"/> MANUFACTURER'S BUY BACK		

5 LIENHOLDER INFORMATION									
If no lien, Print "None"		<input type="checkbox"/> FEID # <input type="checkbox"/> DL# & Sex and Date of Birth <input type="checkbox"/> DMV Account #		Date of Lien		Lienholder Name			
Lienholder E-Mail Address			City						
<input type="checkbox"/> If Lienholder authorizes		Design.		TO VESSELS)					
<input type="checkbox"/> If this box is not checked									

Enter the date read the odometer was read. Please check if the odometer is a 5 digit odometer or a 6 digit odometer.

If your odometer reading is less than 100,000 miles, please start in the 2nd box with the current mileage

6 APPLICATION ATTESTMENT/SIGNATURES AND ODOMETER DECLARATION/DISCLOSURE									
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WARNING: Federal and state law require that you state the mileage in connection with an application for Certificate of Title. Providing a false statement may result in fines or imprisonment.

I (WE) STATE THAT THIS 5 or 6 DIGIT ODOMETER NOWS READS .XX (NO TENTHS) MILES,

DATE READ ____/____/____, AND I/WE HEREBY CERTIFY THAT TO THE BEST OF MY/OUR KNOWLEDGE THE ODOMETER READING:

CAUTION: READ CAREFULLY BEFORE YOU CHECK A BOX

- 1. REFLECTS ACTUAL MILEAGE.
- 2. IS IN EXCESS OF ITS MECHANICAL LIMITS. (EXCESS OF ITS MECHANICAL LIMITS APPLIES TO 5 DIGIT ODOMETERS)
- 3. IS NOT THE ACTUAL MILEAGE. **WARNING - ODOMETER DISCREPANCY**

Must mark one

I CERTIFY THAT THE MOTOR VEHICLE/VESSEL DESCRIBED ABOVE WILL NOT BE OPERATED ON THE STREETS AND HIGHWAYS/WATERWAYS OF THIS STATE AND NO FLORIDA LICENSE PLATE HAS BEEN TRANSFERRED TO OR PURCHASED FOR THIS MOTOR VEHICLE.

I am/we are the owner(s), lienholder(s), and am legally authorized to apply for and receive the Duplicate Certificate of Title. I/we further agree to indemnify the Department and defend the Certificate of Title against all actions or claims by any person.

UNDER PENALTIES OF PERJURY, I/WE DECLARE THAT I/WE HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

IF APPLICABLE, I ATTEST TO HAVING ACQUIRED THE MOTOR VEHICLE, MOBILE HOME OR VESSEL DESCRIBED ABOVE BY:					Date Sold		Selling Price \$	
<input type="checkbox"/> PURCHASE		<input type="checkbox"/> GIFT	<input type="checkbox"/> INHERITANCE		<input type="checkbox"/> COURT ORDER			

Signature of Purchaser: _____

Printed Name of Purchaser: _____

Signature of Co-Purchaser: _____

Printed Name of Co-Purchaser's: _____

Signature of Seller/ Owner/Lienholder: _____

Printed Name of Seller/ Owner/Lienholder: _____

Signature of Co-Owner: _____

Printed Name of Co-Owner: _____

7 FOR FLORIDA DMV OR TAX COLLECTOR/LICENSE PLATE AGENCY USE ONLY							
<input type="checkbox"/> Duplicate authorization verification completed	Signature		Printed Name		County	Agency #	Date Completed

Instructions for Completing the Form HSMV 82101

Section 1 – Type of Application

- **Vehicle/vessel duplicate** – This box indicates you want to order a replacement title. **Also, check the appropriate box indicating lost, stolen or damaged. A fee is required for this type of application.**
- **Vehicle/vessel lost in transit** – This box indicates you have ordered a title and at least 20 days have passed and you have not received the title. No fee is required if the application is made within 180 days of the last title issuance which was lost in the mail. Fees are charged for duplicates or lost in transit requests after more than 180 days from the previous issuance.
- **Vehicle/vessel duplicate with transfer** – This box should be checked if you need to order a duplicate title and immediately transfer it to another owner. Both parties must be present and have photo identification. A power of attorney may not be used, except when a total loss from an insurance company is being paid.

Address Change Directions – For an individual owner or lienholder, if the address differs from the address on the department’s record, one of the following must be submitted:

- Driver license
- Paid receipt for utility or telephone service
- Proof of homestead exemption
- Paid contract or turn-on order for utility service
- Rental or lease contract agreement
- Current year motor vehicle, mobile home or vessel certificate of registration
- Copy of insurance policy for motor vehicle, mobile home or vessel
- Other documentary evidence that provides independent proof of address change

Section 2 – Application for Duplicate is made by: Check the appropriate box to indicate who is applying for the duplicate. Provide name, address and, if you are a dealer, provide your dealer license number.

Section 3 – Motor Vehicle, Mobile Home or Vessel Description: Complete all applicable information. The purchaser must provide a license plate or vehicle registration number if you are requesting a duplicate with transfer unless the vehicle or vessel will not be operated on Florida highways or waterways. If the vehicle or vessel will not be operated on Florida highways or waterways, the box in section 6 must be checked stating such.

Section 4 – Vehicle Usage/Brands: Check the appropriate box to indicate how the vehicle will be used. If the vehicle is your personal vehicle, private use should be checked.

Section 5 – Lienholder Information: If there is no lienholder, the word none should be indicated in the first box. If a lien is being added to the record at the time the application is submitted, all information should be completed.

Section 6 – Application Attestment/Signatures and Odometer Declarations/Disclosures: Check the box to indicate whether the vehicle has a five or six-digit odometer and enter the odometer reading from the vehicle. The vehicle is exempt from the odometer requirement if it is 10 years old or older.

- Enter the odometer reading from the motor vehicle, unless the motor vehicle is exempt from the odometer requirement. If there is any reason to doubt the odometer reading does not accurately reflect “actual” mileage, check the box to indicate “not actual mileage.” If the vehicle has more than 99,999 on the odometer reading and it is a 5-digit odometer, the box “in excess of mechanical limits” must be checked.
- If a duplicate with transfer is requested, enter the date of sale and the selling price. The appropriate box indicating the type of transaction must also be checked. If the vehicle/vessel will not be operated on Florida highways or waterways, the box must be checked.
- The appropriate customer(s) must sign and print their names in the spaces provided.

Fees and Addresses:

Fees are located on our website (<http://www.flhsmv.gov/hsmvdocs/Fees-01.pdf>). Addresses for all Florida county tax collectors’ offices are located on our website at: (www.flhsmv.gov/offices). Some county agencies offer a fast title service for an additional fee.

THIS FORM IS A COMBINATION OF FORMS HSMV 82101, 82055 AND 87009.