CNTY# AGY# SUB# RPT#

AUDIT#



## STATE OF FLORIDA APPLICATION FOR VEHICLE/VESSEL CERTIFICATE OF TITLE

L# 375292 T# 812143082 B# 258414 S# 27458750

MAKE or MANUFACTURER TITLE NUMBER VEHICLE/VESSEL IDENTIFICATION # YR. MAKE VEHICLE COLOR WT/LENGTH GVW/LQC 115702669 1G6ET1293TU600591 1996 CADI 2D 2980 GRN AUTH DESTRUCTION DATE OF ISSUE MO. DAY YEAR TRANS CODE HIII VESSEL VEHICLE USE **PROPULSION** FUEL WATER **FL NUMBER** MATERIAL 07 21 14 OUT PRIVATE BIRTHDATE RESIDENT CNTY SEX MO. DAY YEAR ALIEN Name & Address N M APOSTOL 42 5755 SW RANCHITO STREET 2nd OWNER FL/DL# OR PALM CITY, FL 34990-5257 1st OWNER FL/DL# OR F.E.I.D.# UNIT# A123633471700 **VOLUNTARY CONTRIBUTIONS** AGENCY FEE GRAND TOTAL TITLE FEE SALES TAX 4.75 81.00 30.00 115.75 Action Requested: ORIG USED TITLE Brands: RETAINED AS ELECTRONIC TITLE ODOMETER DECLARATION CERTIFICATION PREV. STATE DATE ACQUIRED NEW ODOMETER / VESSEL MANUFACTURER USED NY 07/21/2014 **EXEMPT** XX LIEN INFORMATION FEID # OR FL/DLAND SEX AND DATE OF BIRTH DMV ACCOUNT # DATE OF LIEN RECEIVED DATE NAME OF FIRST LIENHOLDER SALVAGE TYPE ADDRESS **SELLER INFORMATION** NAME OF SELLER, FLORIDA DEALER, OR OTHER PREVIOUS OWNER ADDRESS DEALER LICENSE NO. CONSUMER OR SALES TAX EXEMPTION & INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY UNPAID BALANCE DUE SELLER, BANK OR OTHERS 500.00 SALES TAX AND USE REPORT TRANSFER OF TITLE PURCHASER HOLDS VALID INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER \$ 212, FLORIDA STATUTES 30.00 IS EXEMPT FROM EXEMPTION CERTIFICATE FLORIDA SALES OR VEHICLE / VESSEL WILL BE USE TAX FOR THE USED EXCLUSIVELY FOR RENTAL REASON(S) CHECKED SELLING PRICE VERIFIED APPLICANT CERTIFICATION IME HEREBY CERTIFY THAT THE VEHICLE/VESSEL TO BE TITLED WILL NOT BE OPERATED UPON THE PUBLIC HIGHWAYS/MATERWAYS OF THIS STATE I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED. I CERTIFY THAT THIS MOTOR VEHICLE/VESSEL WAS REPOSSESSED UPON DEFAULT OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION INWE HEREBY CERTIFY THAT INWE LAWFULLY OWN THE ABOVE DESCRIBED VEHICLE/VESSEL, AND MAKE APPLICATION FOR TITLE. IF LIEN IS SEING RECORDED NOTICE IS HEREBY GIVEN THAT THERE IS AN EXISTING WRITTEN LIEN INSTRUMENT INVOLVING THE VEHICLE/JESSEL DESCRIBED ABOVE AND HELD BY LIENHOLDER BHOWN ABOVE. UWE FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS UNDER PENALTIES OF PERJURY, 1 DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE. Signature of Applicant/Co-Owner Signature of Applicant/Owner HSMV 82041 REVISED 02/06 SCAN CODE MVT

I UNDERSTAND THAT MY DRIVER LICENSE AND REGISTRATIONS WILL BE SUSPENDED IMMEDIATELY IF THE INSURER DENIES THE INSURANCE INFORMATION SUBMITTED FOR THIS REGISTRATION.

## NYS DEPARTMENT OF MOTOR VEHICLES

INSPECTION RECEIPT

Test Date: 6/6/2013 Print Date: 6/6/2013 Inspection Type: Initial

FUEL TYPE:

VIN: 1G6ET1293TU600591

1996

MODEL: **ELDORADO** 

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YEAR:

MAKE: CADILLAC

PLATE: FHM4507 MILEAGE: 119042

VEHICLE WT: 0 - 8500 lbs.

Gasoline

EIR#:

423249

INSPECTION RESULT: PASS

Inspection Fee

\$37.00

SAFETY:

**PASS** 

STICKER NUMBER:

04661318

EMISSIONS:

EXPIRATION:

6/30/2014

**ATTENTION MOTORIST:** Congratulations, your vehicle has passed its annual New York State inspection. Please retain this receipt for your records. You may be required to present this receipt in order to renew your vehicle registration.

The results of the inspection will be transmitted electronically to DMV, usually within 24 hours.

Wheel(s) removed to inspect brakes:L/F, L/R

Station Name

COUNTY AUTO REPAIR INC

Address

LAWRENCE, NY 11559

Phone:

(516) 239-5552

B000028648

Station No. Inspector No. 7079318 3GK2

NYVIP Unit No. Name / RO#:

661 BURNSIDE AVE

Inspection Performed Online:

YES 1096

NYVIP Record Number DMV RECORD MATCH:

VEHICLE INSPECTION QUESTIONS

For additional information please contact the Department of

Motor Vehicles at:

Website Address:

www.NYSDMV.com/vehsafc.htm

Telephone Number: (718) 477-4820