

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTOR VEHICLES
Neil Kirkman Building - Tallahassee, FL 32399-0610

APPLICATION FOR NOTICE OF LIEN / REASSIGNMENT OF LIEN OR NOTICE TO FIRST LIENHOLDER OF SUBSEQUENT LIEN

SECTIONS 1 AND 2 SHOULD BE COMPLETED IF ADDING AN ORIGINAL LIEN.

SECTIONS 1 AND 3 SHOULD BE COMPLETED IF REASSIGNING A LIEN.

SECTIONS 1, 2 AND 4 SHOULD BE COMPLETED IF ADDING A SUBSEQUENT LIEN.

- MOTOR VEHICLE
 MOBILE HOME
 VESSEL

1 MOTOR VEHICLE, MOBILE HOME OR VESSEL DESCRIPTION				
IDENTIFICATION NUMBER		VESSEL REGISTRATION NUMBER		
MAKE/MANUFACTURER	YEAR	MODEL	WT.-LGTH.-BHP	
COLOR	TYPE		USE	
CERTIFICATE OF TITLE NUMBER		PREVIOUS ISSUE DATE	LICENSE PLATE NUMBER	
2 NOTICE OF LIEN LIENHOLDER INFORMATION				
DATE OF LIEN	FEID # / SUFFIX # OR DL # OR SEX AND DATE OF BIRTH		LIENHOLDER NAME	
LIENHOLDER ADDRESS		CITY	STATE	ZIP CODE

- Electronic title and lien participant (Electronic title only).
 If Lienholder authorizes the Department to send title to the owner, _____
 check box and countersign. **(DOES NOT APPLY TO VESSELS)** Signature of Lienholder's Representative

One of the following boxes must be checked.

- A security agreement, retain title contract, conditional bill of sale, chattel mortgage or other similar instrument was executed prior to the filing of this notice of lien.
 This notice of lien is being filed before a security agreement, retain title contract, conditional bill of sale, chattel mortgage or other similar instrument is being executed.

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

Signature of Registered Owner	Signature of Registered Co-Owner
Street Address (Owner)	Street Address (Co-Owner)
City State Zip Code	City State Zip Code

3 APPLICATION FOR REASSIGNMENT OF LIEN

The undersigned hereby represents that they are the assignee of that certain first or second lien dated the _____ day of (Month/Year) _____, covering the motor vehicle, mobile home or vessel described in section one of this form and

desires to have the Certificate of Title issued on (Month/Day/Year) _____, show such lien as now being held by the undersigned applicant and represents that on this date there is a balance as principal still due and unpaid.

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

Name of Assignee (New Lienholder)	By _____ Signature of Lienholder's Representative
Address _____	Title _____
City _____ State _____ Zip Code _____	

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

Name of Assignor (Lienholder currently shown on Title)	By _____ Signature of Lienholder's Representative
Address _____	Title _____

NOTICE TO FIRST LIENHOLDER OF SUBSEQUENT LIEN

Date _____

To: _____
First Lienholder

Address: _____

City and State: _____ Zip Code _____

You are in possession of Florida Certificate of Title Number _____ issued on (Date) _____ covering the motor vehicle, mobile home or vessel described above on which you have a lien recorded in the office of the DIVISION OF MOTOR VEHICLES in Tallahassee, Florida. **FLORIDA STATUTES REQUIRE FIRST LIENHOLDER TO SUBMIT TITLE TO THE DIVISION OF MOTOR VEHICLES WITHIN TEN (10) DAYS AFTER RECEIPT OF THIS NOTICE.** This is to advise you that I have this date placed an additional lien on the above described motor vehicle, vessel or mobile home with:

Name of Subsequent Lienholder_____
Address_____
City_____
State_____
Zip Code

Please forward the above mentioned Certificate of Title with this request attached, to the DIVISION OF MOTOR VEHICLES, at Tallahassee, Florida, for the purpose of recording the subsequent lien thereon. When the subsequent lien is recorded, the Division of Motor Vehicles will mail a Certificate of Title to you, as first lienholder.

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

Signed: _____
Signature of Owner_____
Signature of Co-OwnerName: _____
Print or Type_____
Print or Type**INSTRUCTIONS WHEN USING SECTION 4 OF THIS FORM.**

Prepare in duplicate and send a copy of this form by registered or certified mail with returned receipt requested to first lienholder, as shown on DMV database record. Submit the original copy of the form to a County Tax Collector's office with the return receipt signed by first lienholder, and lien recording fee provided by section 328.14(6), Florida Statutes for vessels, or by section 319.32(1) and (2)(a), Florida Statutes for motor vehicles and mobile homes.

Notice to First Lienholder: If you fail, neglect, or refuse to forward the certificate of title to the department within 10 days from the date of the owner's request, the Department, on the written request of the subsequent lienholder or an assignee thereof, shall make written demand to you for the return of such certificate of title for the notation of the second or subsequent lien or encumbrance.

THIS FORM IS A COMBINATION OF FORMS HSMV 82139, HSMV 82140, HSMV 82365 AND HSMV 87004.