



STATE OF FLORIDA
 DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
 DIVISION OF MOTOR VEHICLES
 NEIL KIRKMAN BUILDING, TALLAHASSEE, FL 32399-0500

STATEMENT OF BUILDER

REBUILT
 ASPT
 KIT CAR
 OTHER: _____

| | | | |
|----------------------------------|--|-------------------------------------|--------------------------------------|
| SECTION I. DESCRIPTION OF | <input type="checkbox"/> MOTOR VEHICLE | <input type="checkbox"/> MOTORCYCLE | <input type="checkbox"/> MOBILE HOME |
|----------------------------------|--|-------------------------------------|--------------------------------------|

1. _____ Year _____ Make _____ Identification Number _____ Color _____ Body _____ Length
2. Title Number: _____ Title State: _____
3. Other/Title Number: _____ Title State: _____
4. Motor Vehicle/Motorcycle is complete and in road operable condition. _____ (Initials)
- Mobile Home is habitable for residential or commercial purposes. _____ (Initials)

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| SECTION II. MAJOR COMPONENT PARTS USED IN THE BUILDING/REPAIR PROCESS |
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Note: Major component parts defined as: For motor vehicles other than motorcycles, any fender, hood, bumper, cowl assembly, rear quarter panel, trunk lid, door, deck lid, floor pan, engine, frame, transmission, catalytic converter or airbag.

1. This section is not applicable as the Motor Vehicle Motorcycle or Mobile Home was purchased from _____ on _____ 20_____, in complete rebuilt or ASPT condition.
2. List the major component parts used in the building/repair process (if additional space is needed, please use form HSMV 84491).

| <u>Part</u> | <u>New</u> | <u>Used</u> | <u>Repaired</u> | <u>Aftermarket</u> | <u>Homemade</u> | <u>Source/VIN</u> |
|-------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-------------------|
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

3. When Section II (1) is not applicable, describe the repairs made in detail. (If additional space is needed, please use form HSMV 84491. Attach the original MSO, bill of sale(s), or receipt(s) for all major component parts (must contain name, address, telephone, and signature of seller). _____
4. Number of Receipts: _____

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| SECTION III. CUSTOM VEHICLE OR STREET ROD |
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The following statements are required to be attested to according to section 320.0863, Florida Statutes. Failure to attest to these statements will cause this agency to reject your application.

- The vehicle will not be used for general daily transportation but will be maintained for occasional transportation, exhibitions, club activities, parades, tours, or other functions of public interest and similar uses.
- The vehicle meets state equipment and safety requirements for motor vehicles that were in effect in this state as a condition of sale in the year listed as the model year on the certificate of title.

By checking the boxes above and by signature below, I acknowledge and attest to the statements above as my written statement relating to a custom vehicle or street rod.

Signature _____ Date _____
 HSMV 84490 (Rev. 08/18/10)

SECTION IV. APPLICANT INFORMATION AND SIGNATURE

Date: _____

The undersigned hereby certifies that the vehicle conforms to Florida and Federal Motor Vehicle Safety Standards. **UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS PROVIDED HEREIN ARE TRUE. NO MATERIAL INFORMATION REGARDING THE MOTOR VEHICLE, MOTORCYCLE, OR MOBILE HOME HAS BEEN OMITTED.**

PRINTED NAME OF APPLICANT/BUSINESS

PRINTED NAME OF APPLICANT/BUSINESS

STREET ADDRESS

STREET ADDRESS

CITY STATE ZIP

CITY STATE ZIP

TELEPHONE NUMBER: _____

TELEPHONE NUMBER: _____

SIGNATURE OF APPLICANT/BUSINESS

SIGNATURE OF APPLICANT/BUSINESS

SECTION V. DMV USE ONLY

Signature below only attests to DMV inspection and does not apply to verification of Sections I, II, III or IV completed by applicant.

VIN: _____

Title Number: _____

D-1: _____

Title State: _____ Odometer: _____

D-2: _____

Year: _____ Make: _____

D-3: _____

Body: _____ Color: _____

D-4: _____

Audit #: _____ Region #: _____

Please mark the appropriate answer:

Secondary VIN Verified Yes No

FRVIS Yes No

Federal Decal Yes No

Previous Rebuilt Title Yes No

Replacement VIN Plate/Decal Yes No

NICB Check Yes No

Vehicle Painted Prior to Inspection Yes No

Tax Due On: _____

This ASPT/Vehicle resembles a: _____

Component Parts Marked Yes No

Flood Damaged Yes No

Theft Yes No

Mobile Home Use Only: Mobile Home was measured

With Tongue or Without Tongue

Comments: _____

Under penalties of perjury, I declare that I have made inspection of this motor vehicle, motorcycle, or mobile home and completed Section V based on that inspection.

Signature of Inspector

Inspector's Badge ID Number

Print Name of Inspector

Date