

**FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES  
APPLICATION FOR SALVAGE TITLE/CERTIFICATE OF DESTRUCTION**

**SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE**

[www.flhsmv.gov/offices/](http://www.flhsmv.gov/offices/)

*Instructions on Reverse Side*

1 APPLICANT INFORMATION						
<b>TOTAL LOSS BY INSURANCE COMPANY</b>				<b>UNINSURED OR SELF-INSURED</b>		
<input type="checkbox"/> TOTAL SALVAGE LOSS		<input type="checkbox"/> TOTAL THEFT LOSS		<input type="checkbox"/> SALVAGE BY OWNER(S) (No Insurance Company Involved)		
Insurance Company's Name				Owner's Name		
Address				Address		
City		State		City		State Zip
Date Declared Total Loss and Compensation Paid				Date of Loss		Sex and Date of Birth
<input type="checkbox"/> Policy Number		<input type="checkbox"/> Claim Number		FEID Number		
<input type="checkbox"/> Driver License or Identification Card Number				<input type="checkbox"/> FEID #		<input type="checkbox"/> DMV Account #
Company's E-Mail Address:				Owner's E-Mail Address:		
2 VEHICLE DESCRIPTION						
Vehicle Identification Number			Year	Make	Body	Color Florida Title Number
Previous State of Issue	License Plate Number	Weight	Length	BHP/CC	GVW/LOC	Florida Current Date of Issue
3 IMPORTANT: SEE VEHICLE IDENTIFICATION NUMBER VERIFICATION ON REVERSE SIDE OF THIS FORM						
4 SALVAGE TITLE/CERTIFICATE OF DESTRUCTION NOTATION INFORMATION						

**Lines a, b, c and d are not required to be completed for total theft loss or "insurance declared total loss" vehicles.**

- a. Enter vehicle's current retail cost on this line..... (a) \_\_\_\_\_  
(Use any official used car or used mobile home guide)
- b. Multiply line (a) by .80, enter amount on this line ..... (b) \_\_\_\_\_
- c. Enter estimate of cost to repair physical and mechanical damage on this line ..... (c) \_\_\_\_\_
- d. If amount on line (c) is less than amount on line (b), check the applicable box .....  Rebuildable  Rebuildable Flood
- e. If amount on line (c) is equal to or more than amount on line (b), **OR**  
If the insurance company wants to request a CD (even if the vehicle is worth less than \$1,500), check here. ....  Certificate of Destruction (unrebuildable)
- f. If vehicle is a total theft loss, check here. ....  Total Theft Loss
- g. The above described damaged vehicle is equipped with custom lowered floors for wheelchair access or a wheel chair lift and is repairable to a condition that is safe for operation on public roads. ....  "Insurance declared total loss" brand and rebuildable salvage

**5** If applying for a duplicate Certificate of Destruction, check here. ....

**6** If this transfer of title is exempt from Florida sales tax due to a settlement of an insurance claim, check here.

**7** The undersigned applicant hereby certifies that the motor vehicle to be titled will not be operated upon the highways of this state.

8 ODOMETER DECLARATION	
WE STATE THAT THIS <input type="checkbox"/> 5 OR <input type="checkbox"/> 6 DIGIT ODOMETER NOW READS <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> .XX (NO TENTHS) MILES, DATE READ _____/_____/_____, AND I/WE HEREBY CERTIFY THAT TO THE BEST OF MY/OUR KNOWLEDGE THE ODOMETER READING:	
<input type="checkbox"/> 1. REFLECTS ACTUAL MILEAGE. <input type="checkbox"/> 2. IS IN EXCESS OF ITS MECHANICAL LIMITS. <input type="checkbox"/> 3. IS NOT THE ACTUAL MILEAGE. (WARNING - ODOMETER DISCREPANCY)	

9 APPLICANT ATTESTMENT SIGNATURES
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**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE. I/WE AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS.**

\_\_\_\_\_  
Applicant or Authorized Agent's Signature

\_\_\_\_\_  
Applicant or Authorized Agent's Printed Name

**NOTE: Properly Assigned Certificate of Title MUST BE ATTACHED**

10 DEALER SALES TAX REPORT (if applicable)					
FL. SALES TAX REGISTRATION NUMBER	DATE OF SALE	NET SELLING PRICE	DEALER LICENSE NUMBER	AMOUNT OF TAX	DEALER/AGENT SIGNATURE

**MOTOR VEHICLE IDENTIFICATION NUMBER VERIFICATION**

THIS SECTION REQUIRES A PHYSICAL INSPECTION AND A VERIFICATION OF THE VEHICLE IDENTIFICATION NUMBER OF THE MOTOR VEHICLE DESCRIBED ON THIS FORM BY A LICENSED DEALER, FLORIDA NOTARY PUBLIC, POLICE OFFICER, FLORIDA DIVISION OF MOTOR VEHICLES EMPLOYEE OR TAX COLLECTOR EMPLOYEE. **IF THE VIN IS VERIFIED BY AN OUT OF STATE MOTOR VEHICLE DEALER, THE VERIFICATION MUST BE SUBMITTED ON THEIR LETTERHEAD STATIONERY.** COMPLETE THIS SECTION ON ALL USED MOTOR VEHICLES, INCLUDING TRAILERS (WITH ABBREVIATION OF TL AND A WEIGHT OF 2,000 POUNDS OR MORE) NOT CURRENTLY TITLED IN FLORIDA.

I, the undersigned, certify that I have physically inspected the vehicle described on side 1 of this form and found the vehicle identification number to be:

VEHICLE IDENTIFICATION NUMBER

SIGNATURE		PRINTED SIGNATURE		DATE
Law Enforcement Officer or Florida Dealer/Agency Name		Badge Number or Florida Dealer Number		
Florida DHSMV/Tax Collector Employee		Florida Compliance Examiner/Inspector Badge or ID Number		

Notary's Signature \_\_\_\_\_ Printed Name of Florida Notary \_\_\_\_\_ (Notary Stamp)  
(Print, Type or Stamp)

**WHEN DOES THE VIN VERIFICATION ON THIS FORM NOT HAVE TO BE COMPLETED?**

THE VIN VERIFICATION ON THIS FORM DOES NOT HAVE TO BE COMPLETED ON NEW MOTOR VEHICLES, MOBILE HOMES, TRAVEL TRAILERS, CAMPING TRAILERS, FIFTH WHEEL RECREATIONAL VEHICLES, TRAILERS OR SEMI TRAILERS WITH A NET WEIGHT OF LESS THAN 2,000 POUNDS, WHEN A FLORIDA CERTIFICATE OF TITLE IS SUBMITTED AS PROOF OF OWNERSHIP OR WHEN FORM HSMV 82042 HAS BEEN COMPLETED AND IS ATTACHED.

**WHEN SHOULD THE ODOMETER DECLARATION ON THIS FORM NOT BE COMPLETED?**

THE ODOMETER DECLARATION IN SECTION 8 OF THIS FORM DOES NOT HAVE TO BE COMPLETED WHEN THE VEHICLE BEING TITLED IS EXEMPT FROM ODOMETER DISCLOSURE REQUIREMENTS. **EXEMPTIONS:** WHEN THE VEHICLE IS TEN YEARS OLD OR OLDER, HAS A GROSS VEHICLE WEIGHT RATING (GVWR) OF MORE THAN 16,000 POUNDS OR IS NOT SELF PROPELLED.

**WHO IS AUTHORIZED TO USE THIS FORM?**

Any person, or authorized agent of any person or business, required to make application for a Florida Salvage Certificate of Title/Certificate of Destruction.

**WHEN SHOULD THIS FORM BE USED?**

1. When an insurance company has paid a "Total Loss" on a motor vehicle or mobile home and must make application for a Salvage Certificate of Title/Certificate of Destruction in the name of the insurance company.
2. When an Uninsured or Self-Insured has a motor vehicle or mobile home that has been wrecked or damaged, and at the time of loss the cost of repairing or rebuilding the motor vehicle or mobile home is 80% or more of the cost to the owner of replacing the wrecked or damaged motor vehicle or mobile home with one of like kind or quality.
3. When applying for a duplicate Certificate of Destruction.

**NOTE: If requested, a Salvage Rebuildable or Salvage Rebuildable Flood certificate of Title for an uninsured motor vehicle or mobile home may be issued if the cost of repairing or rebuilding the vehicle is less than 80 percent.**

**FILING:**

1. ALL APPLICABLE SECTIONS OF THIS FORM MUST BE COMPLETED LEGIBLY.
2. THIS FORM MUST BE DOCUMENTED BY THE ATTACHMENT OF **ONE** OF THE FOLLOWING, UNLESS APPLYING FOR A DUPLICATE CERTIFICATE OF DESTRUCTION:
  - (A) FLORIDA CERTIFICATE OF TITLE.
  - (B) MANUFACTURER'S CERTIFICATE OF ORIGIN.
  - (C) OUT-OF-STATE TITLE OR OTHER OFFICIAL PROOF OF OWNERSHIP.

**NOTE: When an insurance company pays the vehicle owner to replace the wrecked or damaged vehicle with one of like kind or quality, or when an insurance company pays the owner upon the theft of the motor vehicle or mobile home, the insurance company must have the title/Certificate of Destruction issued in their name.**

**NOTE: A certificate of title will not be issued on a used motor vehicle that has been stolen from an out-of-state owner until the motor vehicle has been recovered and the required VIN verification can be performed.**

**NOTE: This form has been combined with form HSMV 82042.**

Check your local phone book government pages or visit the following website for current mailing addresses: <http://www.flhsmv.gov/offices/>

[www.flhsmv.gov](http://www.flhsmv.gov)