

**STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTOR SERVICES
2900 Apalachee Parkway - Tallahassee, 32399-0610**

(Instructions on Reverse Side)



MOTOR VEHICLE POWER OF ATTORNEY/ODOMETER DISCLOSURE

This form may be used when title is physically held by lienholder or when the title has been lost. This form must be submitted to the state by the person exercising Powers of Attorney. Failure to do so may result in fines or imprisonment.

VEHICLE DESCRIPTION

Vehicle Identification Number	Year	Make	Model	Body	Title No.
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PART A. TRANSFEROR (SELLER'S) POWER OF ATTORNEY TO DISCLOSE MILEAGE.

I/We, _____ (Print Seller's Name) appoint _____ (Print Name of Dealership/Business) as of _____ (Date) as my/our attorney-in-fact with full authority to transfer title, to satisfy any lien and to disclose the mileage for the vehicle described above, exactly as stated in the following disclosure.

WARNING: Federal law and State law require that you state the mileage in connection with transfer of ownership. Providing a false statement may result in fines or imprisonment.

I/WE STATE THAT THIS ☐ 5DIGIT OR ☐ 6 DIGIT ODOMETER NOW READS, ☐ (NO TENTHS) MILES, DATE READ ____/____/____, AND I/WE HEREBY CERTIFY THAT TO THE BEST OF O [QWT"MP QY NGF I G"VJ G"QF QO GVGIT"TGCF R I <

☐ 1. REFLECTS ACTUAL MILAGE

☐ 2. IS IN EXCESS OF ITS MECHANICAL LIMITS.

☐ 3. IS NOT THE ACTUAL MILEAGE

WARNING ODOMETER DISCREPANCY

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

TRANSFEROR (Seller):

Seller's Signature _____ Seller's Printed Name _____

Co Seller's Signature _____ Co Seller's Printed Name _____

Seller's Street Address _____ City _____ State _____ Zip _____

Purchaser's Signature _____ Purchaser's Printed Name _____

TRANSFEE (Purchaser):

Purchaser's Dealership Name _____ Dealer License No. _____
(Print Name of Dealership/Business)

Business Address _____ City _____ State _____ Zip _____

PART B. TRANSFEE (PURCHASER) POWER OF ATTORNEY TO REVIEW TITLE DOCUMENTS AND ACKNOWLEDGE DISCLOSURE. (PART B IS INVALID UNLESS PART A HAS BEEN COMPLETED.)

I/We, _____ (Print Purchaser's Name) appoint _____ (Print Name of Dealership/Business) as of _____ (Date) as my/our attorney-in-fact for the purpose of and with full authority to apply for title and/or registration, to file a lien and to sign the mileage disclosure on the title for the vehicle described above, only if the disclosure is exactly as the disclosure completed below.

WARNING: Federal law and State law require that you state the mileage in connection with transfer of ownership. Providing a false statement may result in fines or imprisonment.

I/WE STATE THAT THIS ☐ 5DIGIT OR ☐ 6 DIGIT ODOMETER NOW READS, ☐ (NO TENTHS) MILES, DATE READ ____/____/____, AND I/WE HEREBY CERTIFY THAT TO THE BEST OF MY/OUR KNOWLEDGE THE ODOMETER READING:

☐ 1. REFLECTS ACTUAL MILAGE

☐ 2. IS IN EXCESS OF ITS MECHANICAL LIMITS.

☐ 3. IS NOT THE ACTUAL MILEAGE

WARNING ODOMETER DISCREPANCY

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

TRANSFEROR (Seller):

Seller's Signature _____ Seller's Printed Name _____
(For Dealership / Business) (For Dealership / Business)

Business Address _____ City _____ State _____ Zip _____

Purchaser's Signature _____ Purchaser's Printed Name _____

TRANSFEE (Purchaser):

Co Purchaser's Signature _____ Co Purchaser's Printed Name _____

Purchaser's Name _____ Street Address _____

City _____ State _____ Zip _____

PART C. CERTIFICATION BY ATTORNEY IN FACT (Person completing Part C must be the same person transferring information and signing the title.)

I, _____ (Print Name of Person exercising above power(s) of attorney), hereby certify that the mileage I have disclosed on the title document is consistent with that provided to me in the above power(s) of attorney. Further, upon examination of the title and any reassignment documents for the vehicle described above, the mileage disclosure I have made on the title pursuant to the power of attorney is the same or greater than that previously stated on the title reassigned documents. This certificate is not intended to create, nor does it create any new or additional liability under Federal or State law.

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

Signature _____ Date _____ Printed Name _____

Street Address _____ City _____ State _____ Zip _____

ORIGINAL:DMS Copy (with Title)

GOLD COPY:Dealer/Business

YELLOW COPY:Part A Seller