



SCOTT LUNSFORD

TAX COLLECTOR

ESCAMBIA COUNTY, FLORIDA

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Miscellaneous Forms

Application for Replacement - Form 83146

This form is completed and remitted to the Tax Collector's office when your customer needs to replace stolen or lost decals or license plates.

1 We need to know what we're replacing.

We need to know why we're replacing it. (check the applicable box)

Was it damaged, defaced, lost?

2 Owner/Applicant Identification

The customer's information goes in this section

3 Vehicle Information

Enter the mobile home information in this section. Be sure to include the decal number since that's what we're replacing.

4 Attestment

This section is a little confusing, but all you need to worry about here is the customer's signature and date.

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES – MOTORIST SERVICES
SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE
www.flhsmv.gov/offices/

APPLICATION FOR REPLACEMENT LICENSE PLATE, VALIDATION DECAL OR PARKING PERMIT

(Instructions on Reverse Side)

1 REPLACEMENT TYPE	REPLACEMENT REASON
Check applicable box below: <input type="checkbox"/> License Plate <input type="checkbox"/> Decal <input type="checkbox"/> License Plate and Decal <input checked="" type="checkbox"/> Disabled Person Long-Term Parking Permit <input type="checkbox"/> Disabled Person Temporary Parking Permit <input type="checkbox"/> HOV (High Occupancy Vehicle) Decal	Check applicable box below: <input type="checkbox"/> Damaged <input type="checkbox"/> Defaced <input type="checkbox"/> Lost <input type="checkbox"/> Lost-in-transit (applied for and never received) <input type="checkbox"/> Voluntary (specific reason for replacement) _____ <input type="checkbox"/> Surrendered/Seized <input type="checkbox"/> Stolen

Please contact your Local County Tax Collector's Office or License Plate Agency for fee information.

2 OWNER / APPLICANT IDENTIFICATION

(Owner's Name) (Owner's Sex, For company, show "C" for sex) (Date of Birth Or Month of Expiration)
(Street Address)
(City) (State) (Zip)
(Lessee's Name) (Lessee's Sex, For company, show "C" for sex) (Date of Birth Or Month of Expiration)
(Street Address)
(City) (State) (Zip)
1st Owner D/L Number: _____ 2nd Owner D/L Number: _____

3 VEHICLE INFORMATION

(a)
(Vehicle Identification Number) (Year) (Make) (Color) (Type) (Title Number)
(b)
(Previous License Plate Number) (Previous Decal Number) (Previous Parking Placard Number)

4 ATTESTMENT

(CHECK WHEN APPLICABLE)
 License Plate Decal HOV Decal Parking Permit was reported stolen to the:
 Police Department OR Sheriff's Office

I hereby certify under the penalty of perjury that the license plate, decal or permit for the vehicle listed in Section 3 (a), is no longer or has never been in my possession for the reason checked in Section 1. All information herein is true and correct to the best of my knowledge.

(Owner/Applicant's Signature) (Date)
Complete the following, if applicable:
_____ was surrendered to the tax collector: _____
(License Plate, Decal, or Parking Permit Number) (County) (Agency)

(Signature of Agency Personnel) (Date)
www.flhsmv.gov

HSMV 83146 (Rev. 09/15) S

Power of Attorney - Form 82053 (not used often)

This form is used to appoint another party to sign on your customer's behalf (i.e. husband signing for wife). We must have either the original or a certified copy. Photocopies will not be accepted. In most situations, you will be the Power of Attorney and your customer will be the grantor. This state form is considered a limited power of attorney, meaning it can only be used for a specific vehicle, vessel or mobile home and it no longer requires notarization.

1 Date and Full Legibly Printed Name is required

The full name of the person being appointed POA goes in this area. If your customer is appointing you, your full name should go here, not the dealership's name.

2 Check One

Is the POA for a
 Motor Vehicle
 Mobile Home
 Vessel

3 Complete all of the sections here including:

Year
 Make
 Body Type (VS)
 Title Number
 VIN

4 Grantor's information

This section requires that the grantor provide
 Their Signature
 Address
 DL number
 Date of Birth

STATE OF FLORIDA
 DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES – DIVISION OF MOTORIST SERVICES
 SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE
www.flhsmv.gov/offices/

POWER OF ATTORNEY FOR A MOTOR VEHICLE, MOBILE HOME OR VESSEL

1 _____
 (Date)

I/We hereby name and appoint, **2** _____, to be my/our
 (Full Legibly Printed Name is Required)

lawful attorney-in-fact, to act for me/us, in applying for an original or duplicate certificate of title, to register, transfer title, or record a lien to the motor vehicle, mobile home or vessel described below, and to print my/our name and sign their name, in my/our behalf. My attorney-in-fact can also do all things necessary to the application or any other related instrument and to bind me/us in as sufficient a manner as I/we myself/ourselves could do, were I/we personally present and signing the same.

With full power of substitution and revocation, I/we hereby ratify and confirm whatever my/our said attorney-in-fact may lawfully do or cause to be done in the virtue hereof.

CHECK ONE: Motor Vehicle Mobile Home Vessel

Year	Make/Manufacturer	Body Type	Title Number

Vehicle/Vessel Identification Number

NOTICE TO OWNER(S): COMPLETE THIS FORM IN ITS ENTIRETY PRIOR TO SIGNING.

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

4

_____ (Signature of Owner "Grantor")	_____ (Legibly Printed Name of Owner "Grantor")
_____ (Driver License, Identification Card or FEID Number for Owner)	_____ (Date of Birth for Owner, if applicable)
_____ (Owner's Address)	_____ (City) (State) (Zip)
_____ (Signature of Co-Owner "Grantor," if applicable)	_____ (Legibly Printed Name of Co-Owner "Grantor," if applicable)
_____ (Driver License, Identification Card or FEID Number for Co-Owner)	_____ (Date of Birth for Co-Owner, if applicable)
_____ (Co-Owner's Address)	_____ (City) (State) (Zip)

This non-secure power of attorney form may be used when an individual or entity appointed as the attorney-in-fact will be completing the odometer disclosure statement as the buyer only or the seller only. However, this form cannot be used to allow an individual or entity (such as a dealership) to sign as both buyer and seller for the purpose of disclosing the odometer reading. This may be accomplished only with the secure power of attorney (HSMV 82995) when:

(a) the title is physically being held by the lienholder; or
 (b) the title is lost.

NOTE: A licensed dealer and his/her employees are considered a single entity.

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

HSMV 82053 (Rev. 12/11) S www.flhsmv.gov