## FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

## APPLICATION FOR JUDGMENT LIEN ON MOTOR VEHICLE OR VESSEL

Please submit this form to your local tax collector office or license plate agency.

https://www.flhsmv.gov/offices/

Section 319.24, Florida Statutes, provides that if a holder of a judgment lien certificate issued pursuant to Section 55.202(2) Florida Statutes, by the Florida Department of State, desires to place a lien on the personal property of the owner of a motor vehicle or vessel, the judgment lienholder must send a written request to the Florida Department of Highway Safety and Motor Vehicles, together with a copy of the lienholder's judgment lien certificate.

INSTRUCTIONS: To submit this application for adding a judgment lien to the Certificate of Florida Title, the following is required:

- 1. Judgment Lien Certificate issued by Florida Department of State
- 2. Applicable Title Fees

SECTION 1: VEHICLE DESCRIPTION											
Select Vehicle Type: ☐ Motor Vehicle ☐ Vessel											
Vehicle Identification Number or Hull Identification Number:											
\			. I								
Year:	Make:	re: Title num		iber:							
SECTION 2: REGISTERED OWNER(s) INFORMATION											
Owner Name: FL DL/ID Numb			er or Owner's Email Address:								
owner rame.		FEID/Suffix Number:									
			1 -		T _						
Owner's Mailing Address:			City:		State:	Zip:					
Co-Owner Name: FL DL/I		FL DL/ID Numb	ID Number or Co-Owner's F			Email Address:					
		*	EID/Suffix Number:			Than 7 ta ar ess.					
			1 -		T -	<u></u>					
Co-Owner's Mailing Address:			City:		State:	Zip:					
SECTION 3: LIENHOLDER INFORMATION											
Are there lienholders currently listed on the title? ☐ Yes ☐ No											
Lienholder Name:			Lienholder's Email Address:								
FL DL/ID Number or FEID/Suffix Number:											
Lienholder's Mailing Address:			City:		State:	Zip:					

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SECTION 4: JUDGMENT LIEN										
Judgment Filing Number:	Amount Due on Money Jud		dgment: Date J		Judgment Lien Awarded:					
					J					
Judgment Lienholder Name:	FL DL/ID Number or		Judgment Lienholder's Email Address:							
	FEID/Suffix Num	ber								
Judgment Lienholder's Mailing Address:			City:			Zip:				
Signature of Judgment Lienholder/Repre		Date Signed:								