

# VEHICLE PURCHASE FROM A PRIVATE PARTY- Within the State of Florida

## Private Party Transaction

### To transfer ownership and update the lienholder information to DFCU Financial:

You must bring the original free and clear Florida Certificate of Title (purchaser & seller sections must be completed), the purchaser completed "Application for Certificate of Title" which is attached, along with proof of insurance (copy or digital copy), and a valid driver's license to your local Department of Motor Vehicle Service Center.

**Please note, only the Borrower(s) who signed the loan contract can be a "Purchaser" on the Title.**

Secured Party Name and Address to be added along with the Lienholder Code:

<b>DFCU FINANCIAL</b> <b>400 TOWN CENTER DR</b> <b>DEARBORN, MI 48126</b>	<b>DMV ACCOUNT# /</b> <b>LIENHOLDER</b> <b>CODE: 0205952900</b>
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**FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES**  
**APPLICATION FOR CERTIFICATE OF TITLE WITH/WITHOUT REGISTRATION**  
**SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE**

CHOOSE APPLICATION TYPE:  ORIGINAL  TRANSFER  VEHICLE TYPE:  MOTOR VEHICLE  MOBILE HOME  VESSEL  OFF-HIGHWAY VEHICLE  ATV  BOAT  HI

**1. VEHICLE INFORMATION**

Vehicle Number: \_\_\_\_\_ Do you have a Florida resident?  Yes  No  
 Are you a Florida resident?  Yes  No  
 Are you a Florida resident?  Yes  No

**2. OWNER/APPLICANT INFORMATION**

Owner's Name: \_\_\_\_\_  
 Owner's Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**3. MOTOR VEHICLE, MOBILE HOME OR VESSEL DESCRIPTION**

Vehicle Make and Model: \_\_\_\_\_ Year: \_\_\_\_\_  
 Vehicle Color: \_\_\_\_\_  
 Vehicle Type: \_\_\_\_\_

**4. LIENHOLDER INFORMATION**

Lienholder Name: \_\_\_\_\_  
 Lienholder Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**5. SIGNATURES**

Signature of Applicant: \_\_\_\_\_  
 Signature of Lienholder: \_\_\_\_\_

**6. NOTES**

FLORIDA SALES TAX REGISTRATION NUMBER: \_\_\_\_\_  
 DATE OF SALE: \_\_\_\_\_  
 YEAR OF TRADE IN: \_\_\_\_\_  
 MAKE OF TRADE IN: \_\_\_\_\_  
 TITLE NUMBER OF TRADE IN: \_\_\_\_\_  
 VEHICLE IDENTIFICATION NUMBER OF TRADE IN: \_\_\_\_\_

If you have any questions, please feel free to contact us.

**email:** [titleservices@dfcufinancial.com](mailto:titleservices@dfcufinancial.com)

**phone:** 313.216.3449

**fax:** 313.322.8435

For detailed information or to schedule an appointment, please visit them online at [flhsmv.gov](http://flhsmv.gov)



The Cash Back  
Credit Union