

Charlotte County Tax Collector

Vickie L. Potts

<http://taxcollector.charlottecountyfl.gov>



Authorization/ Release Affidavit

Owner Information

Vehicle Description

Name of Registered Owner

Title Number

Address

Year and Make

City, State and Zip

Vehicle Identification Number

Phone Number - including area code

I _____ authorize _____ to receive my title certificate for the above described vehicle.

Under Penalties of perjury I declare that I have read the foregoing document and certify that the statement is true. I understand that a person who knowingly makes a false declaration is guilty of the crime of perjury by false written declaration, a felony of the third degree, punishable as provided in Fla. statues 775.082, 775.083 and 775.084

Date Signed

Signature of owner(s)