### **Complaint for Declaratory Judgment**

This packet is designed to help a person represent themselves in Court without the assistance of an attorney. If you have any legal questions please consult an attorney or Legal Aid.

The packet is to assist you in obtaining a title for a vehicle you own but for which you did not receive a title at the time of purchase. The Court may issue an Order directing the Department of Highway Safety and Motor Vehicles to issue a certificate of title for your vehicle. We do not guarantee that either instructions or the forms will achieve the desired results by the parties. Filing Fees are Non-Refundable.

Before the Court will consider such an Order, you must take the following steps:

This Action must be brought in a court of competent jurisdiction based on the value of the property. Your claim amount is based on the value of the property. Please refer to the fee list for Small Claims/County Civil jurisdiction and filing fees. THIS PACKET is not to be used if the Property is valued more than \$30,000.00.

There may be additional fees for Sheriff Service or Publication in Newspaper.

#### **STEP ONE**

Complaint for Declaratory Judgment and Relief
Complete this form in its entirety, sign and date ( With Appropriate Attachments)
Affidavit Vehicle Title Application
Complete this form.
Motor Vehicle, Vessel and Mobile Home Records Request
Complete this form.
Vehicle Identification Number and Odometer Verification
Complete this form.
Summons or Notice of Action/ Affidavit of Diligent Search
Complete this form. (See Instructions for these Forms)
Motion for Default/ Motion for Default Judgment
Complete both forms.

#### **STEP TWO**

Return to Clerk's Office with all necessary forms/ fees to file.

Clerk will issue Summons / Notice of Action.

Once days have been completed please file the appropriate Proof of Publication, if applicable, with clerk and request Default or Notice of Hearing.

## IN THE COUNTY COURT OF THE SECOND JUDICIAL CIRCUIT IN AND FOR GADSDEN COUNTY, FLORIDA

21.1.155	Case No.:
Plaintiff	
Defendant	
COMPLAINT FO	R DECLARATORY JUDGMENT
	under penalty of perjury files this d other relief pursuant to Chapters 86 and 319, Florida
tes, and alleges as follows:	o chief fener parsuant to chapters so and 515, normal
• -	ry judgment and other relief involving the acquisition of a
	County, Florida, and the owner ofaid for in Gadsden County, Florida.
The property has an estimated value this Court.	of \$, which is the jurisdictional amount of
This Court has jurisdiction in this mat	ter.
Onfor the sum of \$	, the Plaintiff paid and purchased the above vehicle
The VIN # is	
	, the owner, ot give the Plaintiff the original title.
The Plaintiff has taken the following	actions to secure legal title:
	Plaintiff,

- 9. The Plaintiff has complied with the requirements of the Department of Highway Safety and Motor Vehicles.
- 10. Plaintiff has contacted the State of Florida Department of Highway Safety and Motor Vehicles and was informed that a court of competent jurisdiction must determine ownership. (Attach copy of letter)
- 11. The Plaintiff has no alternative but to seek the intervention of this Court and request the Court grant relief in this matter.

WHEREFORE, Plaintiff requests this Court to take immediate jurisdiction in this matter, and

A.	complaint that t	cory Judgment finding that based upon circumstances outlined in this he document attached to this complaint is sufficient to facilitate the			
В.	Enter a declarato	issuance of a duplicate title.  Enter a declaratory judgment requiring the Department of Highway Safety and Motor Vehicles to issue a duplicate title for :			
		which is currently in the			
		e Plaintiff, as expeditiously as possible. This judgment would enable comply with the Florida law that requires the registration and licensing			
Dated this _	day of				
		Plaintiff's Signature / Address			
STATE OF FLO	ORIDA				
COUNTY OF					
Sworn to or a	affirmed and signed	before me on			
	by _ Da				
	Name	of Affiant			

( ) Personally Known

**Notary Signature** 

( )Produced Identification

(Print or Stamp Commissioned name of notary)

### DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES DIVISION OF MOTORIST SERVICES

### SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE

www.flhsmv.gov/offices/

### VEHICLE IDENTIFICATION NUMBER AND ODOMETER VERIFICATION

PART A - OWNER'S VEHICLE IDENTIFIC (Completion of this part requires					
AFFIDAVIT:				D	ATE:
This is to certify that I, the undersigned, am the lawful owner of the motor vehicle described on this form and that I have, on the date entered above, made a physical inspection of the motor vehicle and have recorded the vehicle identification number and other identification information and the odometer reading and certification in the spaces provided on this form.					
VEHICLE IDENTIFICATION (MOTOR NU	MBER ALL MAK	ES THROUGH	1954 - IDENTI	FICATION NUM	MBER 1955 AND LATER)
Vehicle Identification Number	Year	Make	Color	Body	Previous State Vehicle Titled In
ODOMETER DECLARATION WARNING: Federal and State law requ Certificate of Title. Failure to complete					
I/WE STATE THAT THIS 5 OR 6	DIGIT ODOM	METER NOW I	READS	$  \square \square, \square$	.XX (NO TENTHS)
MILES, DATE READ//	AND I/V	VE HEREBY C	ERTIFY TH	AT TO THE	BEST OF MY KNOWLEDGE
THE ODOMETER READING:					
1. reflects ACTUAL MILEAGE.	2. is IN EXCES	SS OF ITS MEC	HANICAL LIMI	тѕ. 🔲 3	3. is NOT THE ACTUAL MILEAGE.
UNDER PENALTY OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.  (Owner's Signature) (Owner's Printed Name)					
	OI E IDENTII	EICATION NI	IMRED		<u> </u>
PART B – VERIFICATION OF THE VEHICLE IDENTIFICATION NUMBER  This section requires a physical inspection and a verification of the vehicle identification number (VIN) (or the motor number for motor vehicles manufactured prior to 1955) of the motor vehicle described on this form by a Florida Notary Public, Licensed Dealer, Police Officer, or Florida Division of Motorist Services Employee or Tax Collector Employee. If an out-of-state motor vehicle dealer verifies the VIN, the verification must be submitted on their letterhead stationery. Complete this section on all used motor vehicles, including trailers, (with abbreviation of "TL" with a weight of 2,000 pounds or more) not currently titled in Florida.					
I, the undersigned, certify that I have physically the vehicle to be identical to the vehicle identifie				nd find that th	
Date:					(Seal)
Commissioned Name of Florida Notary:(Pr	int Type or Star	N	lotary's Sign	ature:	
UNDER PENALTY OF PERJURY, I DECLARE STATED IN IT ARE TRUE.					
If other than a Notary, check the box below that a	pplies and sign	and complete	the correspor	nding fields. V	erified by:
Florida Compliance Examiner/Inspector(D	MS/TC Emplo	yee) 🔲 Lav	v Enforceme	nt Officer	Florida Licensed Dealer
Signature:	F	rinted Name: _			
Florida Compliance Examiner/Inspector Name:				Badge	or ID #:
Law Enforcement Agency Name:				LEO Ba	dge #:
Florida Dealer Name:			Florid	a Dealer#:	

♦ NOTICE: ANY ALTERATION OR ERASURE MAY VOID THIS DOCUMENT ♦

HSMV 82042 (REV. 01/13)

www.flhsmv.gov

### WHO IS AUTHORIZED TO COMPLETE THIS FORM?

ANY PERSON OR AUTHORIZED AGENT OF ANY PERSON REQUIRED TO MAKE APPLICATION FOR CERTIFICATE OF TITLE AND/OR REGISTRATION.

#### WHEN SHOULD THIS FORM BE COMPLETED?

ON ALL USED MOTOR VEHICLES, INCLUDING TRAILERS NOT CURRENTLY TITLED IN FLORIDA, WITH A NET WEIGHT OF 2,000 POUNDS OR MORE.

#### WHEN SHOULD THIS FORM NOT BE COMPLETED?

WHEN CERTIFICATE OF TITLE IS BEING APPLIED FOR ON ONE OF THE FOLLOWING:

- NEW MOTOR VEHICLE, REGARDLESS OF WHETHER PURCHASED IN FLORIDA OR OUT-OF-STATE
- 2. MOBILE HOME
- 3. TRAILER OR SEMITRAILER WITH A NET WEIGHT OF LESS THAN 2,000 POUNDS
- 4. TRAILER TYPE RECREATIONAL VEHICLE (TRAVEL TRAILERS AND CAMP TRAILERS)

#### **VIN VERIFICATION BY AN OUT OF STATE MOTOR VEHICLE DEALER:**

IF THE VEHICLE IDENTIFICATION NUMBER (VIN) IS VERIFIED BY AN OUT-OF-STATE MOTOR VEHICLE DEALER, THE VERIFICATION MUST BE SUBMITTED ON THEIR LETTERHEAD STATIONERY.

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



### DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES **DIVISION OF MOTORIST SERVICES**

2900 Apalachee Parkway, Room B231, Mail Stop 57 Neil Kirkman Building - Tallahassee, FL 32399

# MOTOR VEHICLE, VESSEL AND MOBILE HOME RECORDS REQUEST FEES ARE REQUIRED AT TIME OF REQUEST AND ARE PAYABLE TO DIVISION OF MOTORIST SERVICES. PLEASE ALLOW A 2-WEEK PROCESSING TIME FROM THE DATE WE RECEIVE THIS REQUEST.

Requester's Information: Date Name of Requester Reference # (Case/File Name) Street Address To receive personal information, indicate the **Email Address** exemption number(s) from list. \* If you request your own personal information, see note below. City Zip Fax Number Under penalty of perjury, I affirm that I am entitled to receive this information and understand that I may not redisclose this information according to the **Driver Privacy Protection Act**, except as provided in section 119.0712(2), Florida Statutes. Signature of Requester or Contact Person **Telephone Number** \*NOTE: If requesting your own personal information you must include your DL/ID or social security number and sign this request. Type of Record Request: 

Motor Vehicle Vessel **Mobile Home** (Records are available up to 10 years) Certified Record Request (An additional \$3.00 is required per record) You may attach a separate sheet for additional requests. Current Registration Request - \$ .50 Each VIN/HIN Number Make Year Title Number License Plate or FL# ☐ Current Registered Owner ΩR ☐ Owner (as of): Month \_\_\_ \_\_\_ Day \_\_\_ Title Record Request (By Vehicle/Vessel Identification Number or Title Number Only) VIN/HIN Number Title Number ☐ Title History Printout (lists owner(s) of vehicle) - \$1.00 Complete Title History (scanned Images)- \$15.00 ☐ Specific Title Transaction - \$1.00 Per Page We request \$15.00 as initial payment for each record. The fee is \$1 per page. If additional fees are required, we will contact you. (Month, Day and Year) MOTOR VEHICLE RECORD REQUEST BY NAME AND PERSONAL INFORMATION - \$ .50 Each First Middle Last Date of Birth **Driver License/ID number** Social Security # Identify what information needs to be stated in the letter of Request for Letter(s) of Verification: verification or what specifically you are requesting. (If additional Examples of this request are for specific information such as space is needed you may attach a separate sheet.) make, model or body type of motor vehicle, or address on record for a certain date, etc. Letter of Verification - \$1.00 each Certified Letter of Verification - \$4.00 each

### **DRIVER PRIVACY PROTECTION ACT EXEMPTIONS**

Pursuant to section 119.0712(2), F. S., personal information in motor vehicle and driver license records can be released for the following purposes, as outlined in 18 United States Code, section 2721.

- 1. Personal information referred to in subsection (a) shall be disclosed for use in connection with matters of motor vehicle or driver safety and theft, motor vehicle emissions, motor vehicle product alterations, recalls, or advisories, performance monitoring of motor vehicles and dealers by motor vehicle manufacturers, and removal of non-owner records from the original owner records of motor vehicle manufacturers to carry out the purposes of titles I and IV of the Anti Car Theft Act of 1992, the Automobile Information Disclosure Act (15 U.S.C. 1231 et seq.), the Clean Air Act (42 U.S.C. 7401 et seq.), and chapters 301, 305, and 321-331 of title 49, and, subject to subsection.
- 2. For use by any government agency, including any court or law enforcement agency, in carrying out its functions, or any private person or entity acting on behalf of a Federal, State, or local agency in carrying out its functions.
- 3. For use in connection with matters of motor vehicle or driver safety and theft; motor vehicle emissions; motor vehicle product alterations, recalls, or advisories; performance monitoring of motor vehicles, motor vehicle parts and dealers; motor vehicle market research activities, including survey research; and removal of non-owner records from the original owner records of motor vehicle manufacturers.
- 4. For use in the normal course of business by a legitimate business or its agents, employees, or contractors, but only -
  - (a) to verify the accuracy of personal information submitted by the individual to the business or its agents, employees, or contractors; and
  - (b) if such information as so submitted is not correct or is no longer correct, to obtain the correct information, but only for the purposes of preventing fraud by, pursuing legal remedies against, or recovering on a debt or security interest against, the individual.
- 5. For use in connection with any civil, criminal, administrative, or arbitral proceeding in any Federal, State, or local court or agency or before any self-regulatory body, including the service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of a Federal, State, or local court.
- 6. For use in research activities, and for use in producing statistical reports, so long as the personal information is not published, redisclosed, or used to contact individuals.
- 7. For use by any insurer or insurance support organization, or by a self-insured entity, or its agents, employees, or contractors, in connection with claims investigation activities, antifraud activities, rating or underwriting.
- 8. For use in providing notice to the owners of towed or impounded vehicles.
- 9. For use by any licensed private investigative agency or licensed security service for any purpose permitted under this subsection.
- 10. For use by an employer or its agent or insurer to obtain or verify information relating to a holder of a commercial driver's license that is required under chapter 313 of title 49.
- 11. For use in connection with the operation of private toll transportation facilities.
- 12. For any other use in response to requests for individual motor vehicle records if the State has obtained the express consent of the person to whom such personal information pertains.
- 13. For bulk distribution for surveys, marketing or solicitations if the State has obtained the express consent of the person to whom such personal information pertains.
- 14. For use by any requester, if the requester demonstrates it has obtained the written consent of the individual to whom the information pertains.
- 15. For any other use specifically authorized under the law of the State that holds the record, if such use is related to the operation of a motor vehicle or public safety.

If you have questions or need additional information, please contact the Department's Customer Service Center at (850) 617-2000.

Visit our website: www.flhsmv.gov

# IN THE COUNTY COURT SECOND JUDICIA L CIRC UIT IN AND FOR GADSDEN COUNTY, FLORIDA

		CASE
	AFFIDAVIT	
VEHI	CLE TITLE APPLICA	TION
	LE IIILE APPLICA	TION
AFFIANT		
Name		<del>-</del>
AddressCity		
		Zip
Telephone		
VEHICL E INFORMATION		
Year Make	Model	Body
	Wiodei	
Vehicle Identification Number (VII	V	
Purchase Price		
Date of Purchase		y money on this vehicle? Yes No
·		
PREVIOUS OWNER INFORMATION		
I purchased this vehicle from		
Address		
City	State	Zip
I did not receive the title at the time of purc	hase because	
I cannot receive the title at this time because		
I have conducted a diligent search in accorda	ance with the attached A	Affidavit of Diligent Search
Date Signatur	re of Affiant	
STATE OF FLORIDA COUNTY OF		
Sworn to or affirmed and signed before me or	1	Personally Known
		Produced Identification
by Date Name of Affi	ant	Type of Identification Produced

Print or stamp commissioned name of notary

NOTARY PUBLIC SIGNATURE

### In the Circuit Court of the Second Judicial Circuit Of Florida, In and For Gadsden County, Florida Civil Action

	Plaintiff,	Case No
VS		
	Defendant,	
	Ī	Summons: Personal Service on a natural person
State of Florida		P
To Defendants(s)		
. ,		
A laweuit hae h	oon filad agai	IMPORTANT inst you. You have 20 calendar days after this summons is served
		se to the attached Complaint with the Clerk of this Court. A phone
names of the par not file your resp may thereafter b requirements. Yo	ties, must be conse on tim ce taken wit ou may want	written response, including the case number given above and the filed if you want the Court to hear your side of the case. If you do e, you may lose the case, and your wages, money, and property hout further warning from the Court. There are other legal to call an attorney right away. If you do not know an attorney, you ervice or a legal aid office (listed in the phone book). If you choose
to file a written r	esponse you	rself, at the same time you file your written response to the Court copy of your written response to the "Plaintiff/Plaintiff's Attorney
Plaintiff/Plaintiff's <i>F</i>	Attorney	
The State of Flori To each Sheriff of in this lawsuit on th	the State: You	u are commanded to serve this Summons and a copy of the Complaint
iii tiiis iawsuit oii ti	ic above-nami	Nicholas Thomas
Dated on	_, 20	Clerk of Circuit Court
Dated on	_, _0	Ву
		As Deputy Clerk

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the ADA Coordinator; 301 S. Monroe Street, Room 225, Tallahassee, FL 32301; at (606) 4401, at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing or voice impaired, call 711.

#### **IMPORTANTE**

Ueted ha sido demandaldo legalmente. Tiene veinte (20) dias, contados a partir del recibo de esta notificacion, para contestar la demanda adjunta, por escrito, y presentaria ante este tribunal. Una llamada telefonica no lo protegera; si usted desea que el tribunal considere su defensa, debe presentar su respuesta por escrito, incluyendo el numero del caso y los nombres de las partes interesadas en dicho caso. Si usted no contesta la demanda a tiempo, pudiese perder el caso y podria ser despojado de sus ingresos y propiedades, o privado de sus derechos, sin previo aviso del tribunal. Existen otros requisitos legales. Si lo desea, puede usted consultar a un abogado immediatamente. Si no conoce a un abogado, puede llamar a una de las oficinas de asistencia legal que aparencen en la guia telefonica.

Si desea responder a la demanda por su cuenta, al mismo tiempo en que presenta su repuesta ante el tribunal, debera usted enviar por correo o entregar una copia de su respuesta a la persona denominada abaja como "Plaintiff/Plaintiff's Attorney." (Demandate o Abogado del Demanadante).

#### **IMPORTANT**

Des poursuites judiciaries ont ete entreprises contre vous. Vous avez 20 jours consecutifs a partir de la date de l'assignation de cet'te citation pour deposer une reponse ecrite a la plainte ci-jointe aupres de ce Tribunal. Un simple coup de telephone est insuffisant pour vous proteger; vous etes oblige de deposer votre reponse ecrite, avec mention du numero de dossier ci-dessus et du nom des parties nommees ici, si vous souhaitez que le Tribunal entende votre cause. Si vous ne deposez pas votre reponse ecrite dans le relai requis, vous risquez de perdre la cause ainsi que votre salaire, votre argent, et vos biens peuvent etre saisis par la suite, sans aucun preavis ulterieur du Tribunal. Il y a d'autres obligations juridiques et vous porvez requerir les services immediats d'un avocat. Si vous ne connaissez pas d'avocat, vous pourriez telephoner a un service de reference d'avocats ou a un bureau d'assistance juridique (figurant a l'annuaire de telephones).

Si vous choisissez de deposer vous-meme une reponse ecrite, il vous faudra egalement, en meme temps que cette formalite, fiare parvenir ou expedier une copie au carbone ou une photocopie de votre reponse ecrite an "Plaintiff's Attorney" (Plaignant ou a son avocat) nomme ci-dessous.

# INSTRUCTIONS FOR NOTICE OF ACTION/ AFFIDAVIT OF DILIGENT SEARCH

When the Defendant is Unable to be served: If the plaintiff does not have a good address for service or if attempts for service were unsuccessful, you may serve the Defendant by publication in the local newspaper. The following forms are necessary:

AFFI	DAVIT OF DILIGENT SEARCH
	Complete this form. Check all actions that were attempted. THIS FORM MUST BE NOTARIZED. THE CLERK'S OFFICE CHARGES FOR THIS SERVICE.
NOTI	CE OF ACTION
	Complete this form. The clerk to sign and seal the document when it is filed. This document must be taken a Gadsden County newspaper for publication. It must run in the paper once a week for 4 consecutive weeks (four publications being sufficient). The Newspaper will charge you a fee.
	The newspaper will provide you with a notarized affidavit of proof that the document was published according to Florida Statutes. This document must be

filed with the Clerk.

In the County Court, Second Judicial Circuit, In and for Gadsden County, Florida

	Case No:
VS.	Plaintiff(s)
	Defendant(s)
	Notice of Action
TO:	
-	
	YOU ARE HEREBY NOTIFIED that a Complaint for Declaratory Judgment has filed and you are required to serve a copy of your written defenses, if any, to it on
	tiff, whose name and address is
	t either before service on Plaintiff or immediately thereafter; otherwise a Default
	nent will be entered for the relief demanded in the Complaint.
	WITNESS my hand and the seal of the Court on, 20
	Nicholas Thomas Clerk of Circuit Court
	BY:
	BY: Deputy Clerk

### IN THE COUNTY COURT, SECOND JUDICIAL CIRCUIT IN AND FOR GADSDEN COUNTY, FLORIDA

IN RE: T	HE MATTER OF CASE NO.:
	AFFIDAVIT OF DILIGENT SEARCH AND INQUIRY
I, (full legated)	al name), being sworn, certify that the information is true:
1. I have	made a diligent search and inquiry to discover the name and current residence of
date the a necessary (Check all	actions taken) United States Post Office inquiry through Freedom of Information Act, current address or any relocation.
	Last known employment of prior owner, including name and address of employer.
0	Regulatory agencies, including professional or occupational licensing.  Name and address of relatives and contacts with those relatives, and inquiry as to prior owner's last known address. (You are to follow any leads of any addresses where prior owner may have moved. Relatives included but are not limited to parents, brothers, sisters, aunts, uncles, cousins, nieces, nephews, grandparents, great-grandparents, former in-laws, stepparents, stepchildren.
0	Information about prior owner's possible death, and if deceased, the date and location of the death.
0	Telephone listings in the last known locations of prior owner's residence. Internet searches such as people finder Law enforcement arrest and/or criminal records in the last known residential area of prior

owner.

	Department of Motor Vehicles records in the state of prior owner's last known address.
	Department of Corrections records in the state of prior owner's last known address.
	Hospitals in the last known area of prior owner's residence. Utility companies, which include water, sewer, cable, TV and electric in the last known,
J	area of prior owner's residence.
	Tax Assessor's and Property Records at Tax Collector's Office in the area where prior owner last resided.
	Other (explain):
2. Th	e age of prior owner is (check only one):   known(enter age) unknown
	or owner's current residence (check only one)
_	Prior owner's current residence is unknown to me.  Prior owner's current residence is in a state or country other than Florida, and prior owners last
O	known address is
	<u> </u>
Unde	r penalties of perjury, I declare that I have read the foregoing document and that the
	stated in it are true.
Dated	d:
Signat	ture of Affiant
Printe	d name of Affiant:
Addre	ss of Affiant:(Street Address)
	(Address including City, State, Zip)
Telepl	none Number
	E OF FLORIDA ITY OF
Sworn	to or affirmed and signed before onby
(Date)	
	(NOTARY PUBLIC Signature)
	(Print or stamp commissioned name of notary)
_	,
	Personally Known Produced identification
	Type of identification produced

# IN THE COUNTY COURT, IN AND FOR GADSDEN COUNTY, FLORIDA

	CASE NO.
Plaintiff, vs.	
Defendant.	
MOTION FO	R CLERK'S DEFAULT
Plaintiff asks the Clerk to enter a Defendant, for failing to respond as req	a default against, quired by law to Plaintiff's Complaint.
	Name:Address:
	Telephone No
	DEFAULT
A default is entered in this action required by law.	n against the Defendant for failure to respond as
DATE:	Nicholas Thomas CLERK OF THE COURT
	By: Deputy Clerk
Cc:Plaintiff	
 Defendant	-

## IN THE COUNTY COURT OF THE SECOND JUDICIAL CIRCUIT IN AND FOR GADSDEN COUNTY, FLORIDA

		Plaintiff	CASE NO	
VS.				
		 Defendant		
		MOTION FOR DEFAUL	T FINAL JUDGMENT	
		he Court to enter a Defa		
1.	. Plaintiff	f filed a Complaint for De	eclaratory Judgment ag	ainst the Defendant
2		lant has failed to timely fi I by the Clerk of this Cou		fault has been
3	. Plaintiff	f has filed all required Af	fidavits.	
		E, Plaintiff asks this Cour nt against Defendant.	t to enter a Default Fina	al Judgment for
		at Imailed,fax o the Defendant at		
			ss:	

### IN THE COUNTY COURT, SECOND JUDICIAL CIRCUIT IN AND FOR GADSDEN COUNTY, FLORIDA

	Plaintiff	Case No.:
Vs.		
	Defendant	_
	<b>DECLARATORY JUDG</b>	MENT GRANTING VEHICLE OWNERSHIP
properly se establishing	rved, and the Court being duly g proof of ownership and right	onsidered before this Court, and the defendants having been advised and having examined the supporting documents of possession of the applicant and the Court being otherwise this matter the Court hereby finds:
1)	· ·	rein pursuant to Florida Statute 86.011 and Florida Statute
2)	319.28(2)(a). The value of the vehicle descri	ribed as a YEAR:
	MAKE:	MODEL:
	VIN:	
		US DOLLARS
3)	The above described vehicle l	has not been reported stolen.
4)		cate of title issued in his/her name(s).
THE		
sole possess and Motor V	ion and ownership of the vehi Vehicles to issue a certificate of	ds to
DC		mbers at Quincy, Gadsden County, Florida this
	_day of	in the year
		COUNTY JUDGE