

Please complete this form and fax it, along with a copy of your driver's license and vehicle registration, to your NSU Alumni Association at 954-262-3975.

**BOARD OF COUNTY COMMISSIONERS, BROWARD COUNTY, FLORIDA
FINANCE AND ADMINISTRATIVE SERVICES DEPARTMENT
REVENUE COLLECTION DIVISION AFFIDAVIT**

The undersigned hereby certifies the following facts regarding the vehicle described below:

YEAR _____ MAKE _____

VIN# on registration _____

Title# on registration _____

1. _____ My name was entered in error as purchaser on the certificate of title. I have never had possession of or interest in this vehicle..
2. _____ As owner of the above vehicle, I certify that the name of: _____ was entered in error as the purchaser. He/She never had possession of or any interest in this vehicle.
3. _____ My name was entered in error as lienholder on the above mentioned title. I do not hold any lien against this vehicle.
4. _____ The names _____ and _____ shown on the attached documents identify one and the same person.
5. _____ The above-mentioned vehicle has not been/will not be operated on the public highway of the State of Florida.
6. _____ I hereby certify that I did in fact pay \$ _____ for the above-mentioned vehicle and am unable to contact the seller for a notarized bill of sale.
7. _____ I hereby certify that the motor vehicle described above has been disposed of.
8. XX _____ I hereby authorize Nova Southeastern University to replace my current Florida license plate with an NSU specialty plate.

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

Signature

Date (mm/dd/yyyy)

How did you hear about the NSU license plate?

- Flyer Poster Email
 Newsletter AD NSU Website
 Alumni Newsletter Online
 Other _____

Please provide your address for license plate delivery (No P.O. Boxes).

Name (please print)

Mailing Address

Employment Information

City

State

ZIP

Daytime Phone#

Email Address