Florida forms and certificates

Expanded companion packet | Print only the form needed

Choose the correct document

A certificate records a notarial act; an affidavit or trust certification contains the signer's own statements. The signer, recipient, or attorney specifies the required act. These blank templates do not resolve legal questions about a transaction.

Complete before signing and sealing

Use the actual date and your Florida county. Identify the appearing signer, complete the certificate, sign as commissioned and apply your seal. Never sign or seal blank certificates. Attach loose certificates securely and identify the underlying document.

Appearance and remote notarization

Acknowledgments and jurats require the signer's appearance. Online options require a registered online notary and all applicable Chapter 117, Part II safeguards. A checkbox alone is insufficient. A jurat also requires an oath / affirmation and signing before you.

Special handling

The subscribing-witness and event requests are supplied as witness / observer affidavits. They do not authorize notarizing an absent principal or independently certifying that an event occurred. The deposition page certifies oath administration only, not the transcript.

Copy and entity certificates

Copy attestation is limited by F.S. 117.05(12). Do not attest copies of vital records or public records available from their official custodian. Entity acknowledgments record representative execution; they do not certify entity existence or authority.

Trust and powers of attorney

The trustee completes the trust certification. The separate trustee acknowledgment is optional if requested. A POA acknowledgment is separate from execution requirements; Florida generally requires two subscribing witnesses. Copy attestation does not establish a POA's validity.

Vehicle bill of sale

The packet includes unmodified HSMV 82050 from the Pasco Tax Collector. Follow its instructions; it has no notarial block. It does not replace all title-transfer requirements.

Duplicates combined

Partnership / Certificate for Partnership share one form. Copy Certification of Electronic Document appears once.

Contents and official references

Keep these reference pages with your master set

01 Document Copy Certification

02 General Affidavit

03 Attorney in Fact

04 Partnership Certificate

05 Corporation Certificate

06 Electronic Document Copy

07 Trustee Acknowledgment

07a Certification of Trust

08 Subscribing Witness Affidavit

09 Official Florida Vehicle Bill of Sale

10 Power of Attorney Acknowledgment

11 Affidavit of Identity

12 Event or Act Affidavit

13 Deposition Oath Certificate

14 Power of Attorney Copy

15 Acknowledgment Signing by Mark

Official references

Florida Statutes 117.03; 117.05(4), (5), (12)-(14); 117.107(3), (9)-(10); Chapter 117, Part II

www.flsenate.gov/Laws/Statutes/2026/117.05

www.flsenate.gov/Laws/Statutes/2026/117.107

Florida Statutes 736.1017 (trust certification)

www.flsenate.gov/Laws/Statutes/2026/736.1017

Florida Statutes 709.2105 and 709.2106 (POA execution and copies)

www.flsenate.gov/Laws/Statutes/2026/709.2105

Florida Statutes 92.50 (oaths)

Official HSMV 82050: www.flhsmv.gov/pdf/forms/82050.pdf

Downloaded copy: www.pascotaxes.com/documents/pdfdocs/82050.pdf

Document certification - photocopy

F.S. 117.05(12)(a)-(b) | Loose certificate

STATE OF FLORIDA
COUNTY OF _____

On this _____ day of _____, _____ (year), I attest that the preceding or attached document is a true, exact, complete, and unaltered photocopy made by me of _____
(description of document) presented to me by the document's custodian, _____, and, to the best of my knowledge, that the photocopied document is neither a vital record nor a public record, certified copies of which are available from an official source other than a notary public.

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

Certifies copy accuracy only, not the authenticity, legality, or truth of the original. Make or supervise the copy.

General affidavit

Affiant statement with jurat | F.S. 117.05(13)(a)

I, _____ (full name), being duly sworn or affirmed, state from my personal knowledge:

1. _____

_____

_____

_____

_____

I swear or affirm that the foregoing statements are true and correct.

Affiant signature: _____ Date: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by _____ (name of affiant).

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

Affiant supplies the facts. Complete the statement before notarization; affiant signs in the notary's presence.

Attorney-in-fact acknowledgment

F.S. 117.05(13)(c) | Loose certificate

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by

_____ (name of signer)

as attorney-in-fact for

_____

(name of principal).

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

Acknowledges execution in the stated capacity; does not certify the entity, trust, or legal authority.

Partnership acknowledgment

F.S. 117.05(13)(c) | Loose certificate

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by _____ (name of signer)
as partner for

_____
(name of partnership).

Notary seal _____
Signature of Notary Public - State of Florida

_____
Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

Acknowledges execution in the stated capacity; does not certify the entity, trust, or legal authority.

Corporation acknowledgment

F.S. 117.05(13)(c) | Loose certificate

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by _____ (name of signer) as _____ (office / title) for _____ (name of corporation).

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name



[ ] Personally known OR [ ] Produced identification

Type of identification: _____

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

Acknowledges execution in the stated capacity; does not certify the entity, trust, or legal authority.

Electronic document copy certification

F.S. 117.05(12)(a), (c) | Loose certificate

STATE OF FLORIDA
COUNTY OF _____

On this _____ day of _____, _____ (year), I attest that the preceding or attached document is a true, exact, complete, and unaltered (select one):
[ ] copy of a tangible or an electronic record presented to me by the document's custodian; or
[ ] printout made by me from such record.
If a printout, I further attest that, at the time of printing, no security features, if any, present on the electronic record, indicated that the record had been altered since execution.

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

Make or supervise the copy / printing. Excludes vital records and public records available from the custodian.

Trustee acknowledgment

F.S. 117.05(13)(c) | Loose certificate

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by

_____ (name of signer)

as trustee for

_____

(name of trust).

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

Acknowledges execution in the stated capacity; does not certify the entity, trust, or legal authority.

Certification of trust

Trustee-completed statement | F.S. 736.1017 | Page 1 of 2

Trust name:

_____

The trust exists; date trust instrument was executed:

_____

Identity of settlor:

_____

Currently acting trustee name(s) and address(es):

_____

Powers of trustee relevant to proposed transaction:

_____

Proposed transaction:

_____

Does the trust contain powers of direction? [ ] Yes [ ] No:

_____

If yes: current trust director(s):

_____

Trustee powers subject to direction:

_____

Have directors directed or authorized this transaction? Explain:

_____

Certification of trust - continued

Revocability: [ ] Revocable [ ] Irrevocable

Person(s) holding a power to revoke: _____

_____

Cotrustee signing authority (all or fewer than all; explain):

_____

_____

Manner of taking title to trust property:

_____

_____

I certify that the trust has not been revoked, modified, or amended in any manner that would cause the representations in this certification to be incorrect.

Trustee signature: _____ Date: _____

Printed name: _____

A trustee supplies and signs this certification; the notary does not certify trust terms or validity. Have the trustee or counsel complete all applicable information from the trust. This does not create or amend a trust. Attach the trustee acknowledgment only if requested; additional trustees may sign an added, identified page.

Authority: F.S. 736.1017. Dispositive terms need not be included. The recipient may request relevant trust excerpts.

Subscribing witness affidavit

Witness statement only | Not a substitute for the principal's appearance

I, _____ (witness), state:

Document title / date: _____

Name of person whose execution I witnessed: _____

Date and place of witnessed execution: _____

What I personally observed: _____

_____

_____

I swear or affirm that the foregoing statements are true and correct.

Affiant signature: _____ Date: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by _____ (name of affiant).

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

This notarizes the witness's sworn statement only. It does not acknowledge or prove an absent principal's signature.

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES - DIVISION OF MOTORIST SERVICES

SUBMIT THIS FORM TO YOUR LOCAL TAX COLLECTOR OFFICE

www.flhsmv.gov/ offices/

Notice of Sale and/or Bill of Sale for a Motor Vehicle, Mobile Home, Off-Highway Vehicle or Vessel

☐ Notice of Sale (Seller must complete sections 1 & 3). The purchaser's signature in section 3 is optional.

☐ Bill of Sale (Seller and purchaser must complete sections 1, 2 (when applicable) & 3).

1. Motor Vehicle, Mobile Home, Off- Highway or Vessel Description

Year	Make/Manufacturer	Body Type	Model	Color

Certificate of Title Number	Current Title Issue Date	Vehicle/Vessel Identification Number

I/we do hereby sell or have sold and delivered the above described motor vehicle, mobile home, off-highway vehicle or vessel to:

Print Name(s) of Purchaser(s)

Address	City	State	Zip Code

Date of Sale	Selling price
	$

2. Odometer Disclosure Statement (Required For a Motor Vehicle)

Federal and State law requires that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

WE STATE THAT THIS MOTOR VEHICLE'S ☐ 5 DIGIT OR ☐ 6 DIGIT ODOMETER NOW READS ☐☐☐,☐☐☐.xx (NO TENTHS) MILES, DATE READ _____/_____/_____, AND WE HEREBY CERTIFY THAT TO THE BEST OF OUR KNOWLEDGE THE ODOMETER READING:

☐ **1.** REFLECTS THE **ACTUAL MILEAGE**. ☐ **2.** IS **IN EXCESS OF ITS MECHANICAL LIMITS.** ☐ **3.** IS **NOT THE ACTUAL MILEAGE.**

Affidavit (When applicable):

3. Certification

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

Seller's Signature	Seller's Printed Name	Date

Seller's Address	City	State	Zip Code

Co-Seller's Signature (when applicable)	Co-Seller's Printed Name (when applicable)	Date

Co-Seller's Address (when applicable)	City	State	Zip Code

Purchaser's Signature	Purchaser's Printed Name	Date

Co-Purchaser's Signature (when applicable)	Co-Purchaser's Printed name (when applicable)	Date

✱ **OWNERSHIP STATUS FOR THE ABOVE DESCRIBED MOTOR VEHICLE, MOBILE HOME, OFF-HIGHWAY VEHICLE OR VESSEL WILL NOT CHANGE UNTIL THE PURCHASER APPLIES FOR AND IS ISSUED A CERTIFICATE OF TITLE.**

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

A COPY OF THE SELLERS DRIVER LICENSE MUST BE SUBMITTED

Power of attorney acknowledgment

F.S. 117.05(13)(b) | Loose certificate

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by

_____

(name of principal acknowledging execution of the power of attorney).

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

This is only the principal's acknowledgment. It does not replace the two subscribing witnesses required by F.S. 709.2105(2).

Affidavit of identity

Affiant statement with jurat | Not a substitute for required identification

I, _____ (full legal name), state:

Address: _____

Other name(s) used, if applicable: _____

Purpose / document to which this statement relates: _____

_____

My statement concerning my identity: _____

_____

I swear or affirm that the foregoing statements are true and correct.

Affiant signature: _____ Date: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by _____ (name of affiant).

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

Notary must independently establish identity under F.S. 117.05(5) or applicable RON requirements.

Affidavit of an event or act

Observer statement with jurat | Not a notary certification of the event

I, _____ (observer), state:

Event / act: _____

Date, time and location: _____

Persons involved: _____

What I personally observed: _____

_____

_____

I swear or affirm that the foregoing statements are true and correct.

Affiant signature: _____ Date: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by _____ (name of affiant).

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

The observer swears to the facts. The notary certifies the oath and signature, not that the event occurred.

Deposition oath certificate

Oath administration only | F.S. 117.03 and 92.50

STATE OF FLORIDA
COUNTY OF _____

Court / tribunal: _____

Case caption / number: _____

Deposition of: _____

Deposition date / time: _____

Location / proceeding reference: _____

I certify that _____ (name of deponent) appeared before me by means of [ ] physical presence or [ ] online notarization on _____ (date), and that I administered an oath or affirmation to the deponent to testify truthfully in the above-identified deposition.

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

Certifies administration of the oath only, not a transcript or recording. Confirm the proceeding's rules and any required officer certificate with the requesting attorney / court reporter. RON requires a compliant process.

Power of attorney copy attestation

F.S. 117.05(12)(a)-(b) | Loose certificate

STATE OF FLORIDA
COUNTY OF _____

On this _____ day of _____, _____ (year), I attest that the preceding or attached document is a true, exact, complete, and unaltered photocopy made by me of a power of attorney dated _____, executed by _____ (principal) presented to me by the document's custodian, _____, and, to the best of my knowledge, that the photocopied document is neither a vital record nor a public record, certified copies of which are available from an official source other than a notary public.

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

Use only for an eligible copy. If recorded and a certified copy is available, obtain it from the official custodian.

Acknowledgment - signing by mark

F.S. 117.05(14)(b), (c)2 | Two disinterested witnesses required

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of [ ] physical presence or [ ] online notarization, this _____ day of _____, _____ (year), by

_____ (name of signer),

who signed with a mark in the presence of these witnesses:

Witness 1 name: _____

Witness 1 signature: _____

Witness 2 name: _____

Witness 2 signature: _____

Notary seal _____

Signature of Notary Public - State of Florida

_____

Print, type, or stamp commissioned name

[ ] Personally known OR [ ] Produced identification

Type of identification: _____

DOCUMENT IDENTIFICATION

Title / description: _____

Document date: _____ Pages: _____

Signer / custodian: _____

On the underlying signature line, print the signer's first name before the mark, last name after it, and "his mark" or "her mark" below the mark, as applicable. The witnesses must witness the document signing.