

License Number IH / 1054858 / 1 Name: GLENN M WILLIAMS JR

Order #: 1466 Label #: 21079

Homeowner

Burner/Gierhan

Address:

1533 Baugh St

City/State/Zip:

Phone #:

961-9177

Date Installed:

Installed Wind Zone:

II

Note:

Manufacturer

Flitwood

Year Model

Length & Width:

98 X 48

Type Longitudinal System:

Type Lateral Arm System:

New Home:

Used Home: X

Data Plate Wind Zone:

(Check Size of Home)

Single

Double X

Triple

HUD Label #:

Soil Bearing / PSF:

Torque Probe / in.-lbs:

Permit #:

STATE OF FLORIDA
INSTALLATION CERTIFICATION LABEL

21079

LABEL #

DATE OF INSTALLATION

GLENN M WILLIAMS JR

NAME

IH / 1054858 / 1

1466

LICENSE #

ORDER #

CERTIFIES THAT THE INSTALLATION OF THIS MOBILE HOME IS
IN ACCORDANCE WITH FLORIDA STATUTES 320.8249, 320.8325
AND RULES OF THE HIGHWAY SAFETY AND MOTOR VEHICLES

INSTRUCTIONS

PLEASE WRITE DATE OF
INSTALLATION AND AFFIX
LABEL NEXT TO HUD LABEL.
USE PERMANENT INK PEN
OR MARKER ONLY.
COMPLETE INFORMATION
ABOVE AND KEEP ON FILE
FOR A MINIMUM OF 2 YEARS.
YOU ARE REQUIRED TO
PROVIDE COPIES WHEN
REQUESTED.

IDENTIFICATION NUMBER GAFLX34B308990K21	YR 2000	MAKE SPRI	MODEL	BODY HS	WT-L-BHP 48'	VESSEL REGIS. NO.	TITLE NUMBER 81703829
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REGISTERED OWNER

PHILLIP HUGGINS AND
PAUL SHEALEY
8302 PIN OAK ROAD
TALLAHASSEE FL 32310-0720

DATE OF ISSUE

09/08/2000

LIEN RELEASE

INTEREST IN THE ABOVE DESCRIBED VEHICLE IS
HEREBY RELEASED

BY

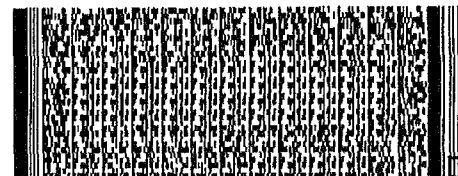
TITLE

DATE

MAIL TO:

08/15/2000

BOMBARDIER CAPITAL INC
PO BOX 600763
JACKSONVILLE FL 32260-0763



CERTIFICATE OF TITLE

SATISFACTORY PROOF OF OWNERSHIP HAVING BEEN SUBMITTED UNDER SECTION 319.23/326.03, FLORIDA STATUTES, TITLE TO THE MOTOR VEHICLE
OR VESSEL DESCRIBED BELOW IS VESTED IN THE OWNER(S) NAMED HEREIN. THIS OFFICIAL CERTIFICATE OF TITLE IS ISSUED
FOR SAID MOTOR VEHICLE OR VESSEL.

IDENTIFICATION NUMBER GAFLX34B308990K21	YR 2000	MAKE SPRI	MODEL	BODY HS	WT-L-BHP 48'	VESSEL REGIS. NO.	TITLE NUMBER 81703829
PREV STATE N	COLOR	PRIMARY BRAND	SECONDARY BRAND	NO OF BRANDS	HOUSE PVT	PREV ISSUE DATE	
ODOMETER STATUS OR VESSEL MANUFACTURER				HULL MATERIAL		PROP	DATE OF ISSUE 09/08/2000

REGISTERED OWNER
PHILLIP HUGGINS AND
PAUL SHEALEY
8302 PIN OAK ROAD
TALLAHASSEE FL 32310-0720

LIEN RELEASE

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HEREBY RELEASED

BY

TITLE

DATE

1ST LIENHOLDER

08/15/2000

BOMBARDIER CAPITAL INC
PO BOX 600763
JACKSONVILLE FL 32260-0763

DIVISION OF MOTOR VEHICLES TALLAHASSEE

FLORIDA

DEPARTMENT OF HIGHWAY SAFETY
AND MOTOR VEHICLES

WILLIAM T. JOYCE
DIRECTOR

Control Number 5912825

FRED O. DICKINSON, III
EXECUTIVE DIRECTOR

ODOMETER CERTIFICATION - Federal and state law require 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.
This title is warranted and certified to be true from any title, except as noted on the face of this certificate and the motor vehicle or vessel described is hereby transferred to:

Purchaser:

Address:

1/We state that this ☐ 5 or ☐ 6 digit odometer now reads ☐ ☐ ☐ ☐ ☐ ☐ (no tenths)

Selling Price:

Date Sold:

and to the best of my knowledge that it reflects the actual mileage of the vehicle described herein, unless one of the odometer statement blocks is checked.

CAUTION
DO NOT CHECK
BOX IF ACTUAL
MILEAGE

I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.

2/ I hereby certify that the odometer reading is not the actual mileage.

WARNING: ODOMETER DISCREPANCY

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

Signatures of:
Purchaser
Signature of
Co-Purchaser
Signature of
Seller
Signature of
Co-Seller
(When Applicable)
Selling Dealer's License Number:
Avail Name

Printed Name of
Purchaser
Printed Name of
Co-Purchaser
Printed Name of
Seller
Printed Name of
Co-Seller

Tax Collected: \$

BSMV 822501 REV 4/00

STATE OF FLORIDA

5126752 2 595769
11P-14111839

IDENTIFICATION NUMBER GAFLX34A308990K21	YR 2000	MAKE SPRI	MODEL	BODY HS	WT-L-BHP 48'	VESSEL REGIS. NO.	TITLE NUMBER 81703719
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REGISTERED OWNER

**PHILLIP HUGGINS AND
PAUL SHEALEY
8302 PIN OAK ROAD
TALLAHASSEE FL 32310-0720**

DATE OF ISSUE

09/08/2000

LIEN RELEASE

INTEREST IN THE ABOVE DESCRIBED VEHICLE IS
HEREBY RELEASED

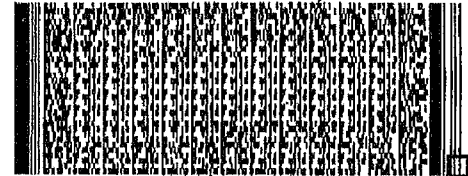
BY _____

MAIL TO:

**08/15/2000
BOMBARDIER CAPITAL INC
PO BOX 600763
JACKSONVILLE FL 32260-0763**

TITLE

DATE



CERTIFICATE OF TITLE

SATISFACTORY PROOF OF OWNERSHIP HAVING BEEN SUBMITTED UNDER SECTION 319.29, 319.30, FLORIDA STATUTES, TITLE TO THE MOTOR VEHICLE
FOR VESSEL DESCRIBED BELOW, IS VESTED IN THE OWNER NAMED HEREIN. THIS OFFICIAL CERTIFICATE OF TITLE IS ISSUED
FOR SAID MOTOR VEHICLE OR VESSEL.

IDENTIFICATION NUMBER GAFLX34A308990K21	YR 2000	MAKE SPRI	MODEL	BODY HS	WT-L-BHP 48'	VESSEL REGIS. NO.	TITLE NUMBER 81703719
PREV STATE N	COLOR	PRIMARY BRAND	SECONDARY BRAND	NO. OF BRANDS	USE PVT	PREV ISSUE DATE	
ODOMETER STATUS OR VESSEL MANUFACTURER				HULL MATERIAL	PROP	DATE OF ISSUE 09/08/2000	

REGISTERED OWNER:
**PHILLIP HUGGINS AND
PAUL SHEALEY
8302 PIN OAK ROAD
TALLAHASSEE FL 32310-0720**

LIEN RELEASE

INTEREST IN THE ABOVE DESCRIBED VEHICLE IS
HEREBY RELEASED

BY _____

TITLE _____ DATE _____

1ST LIENHOLDER

**08/15/2000
BOMBARDIER CAPITAL INC
PO BOX 600763
JACKSONVILLE FL 32260-0763**

DIVISION OF MOTOR VEHICLES TALLAHASSEE

FLORIDA

DEPARTMENT OF HIGHWAY SAFETY
AND MOTOR VEHICLES

**William T. Joyce
DIRECTOR**

Control Number **45912824**

**FRED D. DICKINSON, III
EXECUTIVE DIRECTOR**

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Purchaser: _____ Address: _____

1/We state that this ☐ 5 or ☐ 8 digit odometer now reads (miles) and to the best of my knowledge that it reflects the actual mileage of the vehicle described herein, unless one of the odometer statement blocks is checked.

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

Signature of Purchaser: _____	Printed Name of Purchaser: _____
Signature of Co-Purchaser: _____	Printed Name of Co-Purchaser: _____
Signature of Seller: _____	Printed Name of Seller: _____
Signature of Co-Seller: _____	Printed Name of Co-Seller: _____

(When Applicable) Selling Dealer's License Number: _____ Tax Collected: \$ _____