



Ownership Declaration and Sales and Use Tax Report of Vessel Purchase

**DR-42B
R. 07/02**

Name of vessel	Year	Make	Model	USCG documentation or state reg. no.
Name of purchaser		Florida sales tax registration number		Daytime telephone number (include area code)
Address			City	State ZIP
The vessel described above was purchased from (Name of seller, dealer, or broker)				
Address			City	State ZIP
Delivery was accepted at _____ on the _____ day of _____, 20____.				
<small>Name of marina, boat yard, etc.</small>				
Address			City	State ZIP
Present location of vessel				
Address			City	State ZIP

Indicate the total purchase price, including any unpaid balance due seller, bank, or finance company. Include the total consideration valued in money, whether paid in money or otherwise.

Total purchase price	\$	_____
Less: Trade-in (if applicable)	\$	_____
Net purchase price	\$	_____
Florida tax due (6%)	\$	_____
Florida discretionary sales surtax	\$	_____
Less: Florida tax paid (attach copy of receipt)	\$	_____
Less: Taxes lawfully imposed and paid to another state	\$	_____
<small>(attach copy of receipt)</small>		
Balance due	\$	_____
Penalty (10% per month, up to 50%)	\$	_____
Interest	\$	_____
TOTAL DUE	\$	_____

I hereby affirm under penalty of perjury that all of the above statements are true and correct to the best of my knowledge and belief.

Sworn and subscribed to before me this _____ day of _____, 20____

Notary Public	Signature of purchaser
Date	Date

THIS DOCUMENT MUST BE RETURNED TO THE DEPARTMENT OF REVENUE WITHIN 15 DAYS FROM RECEIPT. A COPY OF THE BILL OF SALE AND OTHER DOCUMENTATION WHICH EVIDENCES OWNERSHIP AND ACTUAL SELLING PRICE MUST BE ATTACHED.

RETURN TO:
 ENFORCEMENT OPERATIONS
 DEPARTMENT OF REVENUE
 POST OFFICE BOX 6417
 TALLAHASSEE, FLORIDA 32314-6417