AFFIDAVIT OF EXEMPTION FROM PROOF REQUIREMENT

[Florida Statute 318.18(2)(b)(1) & (3) – Vehicle Registration or Personal Injury Insurance]

The defendant signing this affidavit appeared before the undersigned authority, and after first being duly cautioned and sworn, deposes and states as follows:

- 1. My name is (PRINT)
- 2. Citation number_____ Case number_____
- 3. I am the defendant cited in the above-referenced State of Florida Uniform Traffic Citation(s) for (check all offenses that apply):

 \Box failure to have in my possession a vehicle registration certificate while operating a motor vehicle

□ operating a motor vehicle without a registration, license plate and validation stickers, □ operating a motor vehicle without personal injury protection insurance.

4. It is impossible or impracticable for me to get a valid motor vehicle registration certificate

and/or personal injury protection insurance because (check one):

- \Box the vehicle was sold
- \Box the vehicle was stolen
- \Box the vehicle was destroyed

□ the owner or registrant of the vehicle is a member of the United States Armed Forces and is called to or on active duty outside the United States in an emergency situation and the vehicle is not operated by any person, or is otherwise not required by Florida Statute 627.733 to maintain personal injury protection insurance

- □ the state in which the vehicle is registered does not issue a certificate of registration
- □ the vehicle is owned by another person
- □ other: reason I am not legally required to provide proof of motor vehicle registration and/or personal injury protection insurance

| | Defendant |
|---|---|
| STATE OF FLORIDA | |
| COUNTY OF ALACHUA | |
| Sworn to (or affirmed) and subscribed before me | by means of 🗖 physical presence or 🗖 online |
| notarization on | _by (affiant name) |
| who is □personally known to me, or □ who proc | luced |
| | as identification. |
| | |

Deputy Clerk or Notary Public