

CERTIFICATE OF TITLE

SECTION 318.23(12)(b), 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 <b>15GGE181831080885</b>	YR <b>2003</b>	MAKE <b>GLLG</b>	MODEL <b>BU</b>	WT-L-BHP <b>30000</b>	VESSEL REGIS NO.	TITLE NUMBER
PREV STATE <b>MS</b>	COLOR <b>BLU</b>	PRIMARY BRAND <b>BUICK</b>	SECONDARY BRAND	NO OF BRANDS	USE <b>PVT</b>	PREV ISSUE DATE
ODOMETER STATUS OR VESSEL MANUFACTURER OR VEH USE <b>31 MILES 07/30/2003 ACTUAL</b>	HULL MATERIAL		PROP	DATE OF ISSUE <b>09/04/2003</b>		

REGISTERED OWNER  
CITY OF KEY WEST  
PO BOX 1409  
KEY WEST FL 33041-1409

LIEN RELEASE  
THE ABOVE DESCRIBED VEHICLE IS  
HEREBY RELEASED  
BY *[Signature]*  
TITLE *[Signature]* DATE *12-23-03*



LIENHOLDER  
MS 26 605 SUWANEE STREET  
TALLAHASSEE FL 32399-0450  
07/30/2003  
FL DEPT OF TRANSPORTATION

DEPARTMENT OF HIGHWAY SAFETY  
AND MOTOR VEHICLES  
FRED O. DICKINSON III  
EXECUTIVE DIRECTOR

TRANSFER OF TITLE BY SELLER (This section must be completed at the time of sale)  
Complete or providing a false statement may result in fines and/or imprisonment.  
This title is warranted and certified to be free from any liens except as noted on the face of this certificate and the motor vehicle or vessel described is hereby transferred to:  
Purchaser: \_\_\_\_\_ Address: \_\_\_\_\_

If We state that this  5 or  6 digit odometer now reads       (no tenths)  
Selling Price \$ \_\_\_\_\_ Date Sold \_\_\_\_\_  
I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.  
CAUTION DO NOT CHECK BOX IF ACTUAL MILEAGE  
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.

Signature of Purchaser \_\_\_\_\_  
Signature of Co-Purchaser \_\_\_\_\_  
Signature of Seller \_\_\_\_\_  
Signature of Co-Seller \_\_\_\_\_  
(When Applicable)  
Selling Dealer's License Number \_\_\_\_\_  
Auction Name \_\_\_\_\_ Tax No. \_\_\_\_\_  
License Number \_\_\_\_\_ Tax Collected \$ \_\_\_\_\_

FIRST REASSIGNMENT BY LICENSED DEALER

Selling Dealer's License No. \_\_\_\_\_ Dealer's Name \_\_\_\_\_ Tax No. \_\_\_\_\_ Tax Collected \_\_\_\_\_  
 Selling Dealer's Address \_\_\_\_\_  
 I/We warrant this title and certify that the vehicle described herein has been transferred on (date) \_\_\_\_\_ to the following:  
 Name(s): \_\_\_\_\_ Address: \_\_\_\_\_  
 I/We state that this  5 or  6 digit odometer now reads \_\_\_\_\_ (no Tenths) miles, date read \_\_\_\_\_ 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  1. 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.  
 Signature of Purchaser: \_\_\_\_\_ Printed Name of Purchaser: \_\_\_\_\_  
 Co-Purchaser: \_\_\_\_\_ Co-Purchaser: \_\_\_\_\_  
 Seller/Agent: \_\_\_\_\_ Seller/Agent: \_\_\_\_\_  
 Auction Name (When Applicable): \_\_\_\_\_ License Number: \_\_\_\_\_

SECOND REASSIGNMENT BY LICENSED DEALER

Selling Dealer's License No. \_\_\_\_\_ Dealer's Name \_\_\_\_\_ Tax No. \_\_\_\_\_ Tax Collected \_\_\_\_\_  
 Selling Dealer's Address \_\_\_\_\_  
 I/We warrant this title and certify that the vehicle described herein has been transferred on (date) \_\_\_\_\_ to the following:  
 Name(s): \_\_\_\_\_ Address: \_\_\_\_\_  
 I/We state that this  5 or  6 digit odometer now reads \_\_\_\_\_ (no Tenths) miles, date read \_\_\_\_\_ 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  1. 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.  
 Signature of Purchaser: \_\_\_\_\_ Printed Name of Purchaser: \_\_\_\_\_  
 Co-Purchaser: \_\_\_\_\_ Co-Purchaser: \_\_\_\_\_  
 Seller/Agent: \_\_\_\_\_ Seller/Agent: \_\_\_\_\_  
 Auction Name (When Applicable): \_\_\_\_\_ License Number: \_\_\_\_\_

THIRD REASSIGNMENT BY LICENSED DEALER

Selling Dealer's License No. \_\_\_\_\_ Dealer's Name \_\_\_\_\_ Tax No. \_\_\_\_\_ Tax Collected \_\_\_\_\_  
 Selling Dealer's Address \_\_\_\_\_  
 I/We warrant this title and certify that the vehicle described herein has been transferred on (date) \_\_\_\_\_ to the following:  
 Name(s): \_\_\_\_\_ Address: \_\_\_\_\_  
 I/We state that this  5 or  6 digit odometer now reads \_\_\_\_\_ (no Tenths) miles, date read \_\_\_\_\_ 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  1. 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.  
 Signature of Purchaser: \_\_\_\_\_ Printed Name of Purchaser: \_\_\_\_\_  
 Co-Purchaser: \_\_\_\_\_ Co-Purchaser: \_\_\_\_\_  
 Seller/Agent: \_\_\_\_\_ Seller/Agent: \_\_\_\_\_  
 Auction Name (When Applicable): \_\_\_\_\_ License Number: \_\_\_\_\_

**NOTICE: \$10.00 PENALTY IS REQUIRED BY LAW IF NOT SUBMITTED FOR TRANSFER WITHIN 30 DAYS AFTER DATE OF PURCHASE**

APPLICATION FOR TITLE BY PURCHASER

I make application for a new certificate of title and registration transfer, if applicable, for said motor vehicle or vessel which now has liens as follows: (Date, name and address of each lienholder, if NONE, write NONE). Record additional liens of Form HSMV 82139. FEID# \_\_\_\_\_ or FL/DL# \_\_\_\_\_ and Date of Birth \_\_\_\_\_ Date of Lien: \_\_\_\_\_  
 Lienholder's Name: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 THIS VEHICLE WILL BE USED AS  TAXICAB  POLICE CAR  LEASED  PRIVATE  
 I/WE HEREBY CERTIFY THAT THE VEHICLE TO BE TITLED WILL NOT BE OPERATED ON THE PUBLIC HIGHWAYS OF THIS STATE.  
 I/We state that this  5 or  6 digit odometer now reads \_\_\_\_\_ (no Tenths) miles, date read \_\_\_\_\_ 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  1. 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.  
 (PRINT/TYPE NAME OF PURCHASER(S) IDENTICALLY AS SIGNED BELOW) NOTE: When joint ownership, please indicate "or" or "and" between names. If no indication, "and" will be shown.  
 MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 PHYSICAL ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ License Plate No. \_\_\_\_\_  
 UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.  
 Signature of 1st Purchaser \_\_\_\_\_ (First Name, Middle Initial, Last Name)  FL RESIDENT  NONRESIDENT  ALIEN (Florida DL# or FEID#) \_\_\_\_\_ (First Purchaser's Date of Birth) \_\_\_\_\_  
 Signature of Co-Purchaser \_\_\_\_\_ (First Name, Middle Initial, Last Name)  FL RESIDENT  NONRESIDENT  ALIEN \_\_\_\_\_ (DL# or FEID#) \_\_\_\_\_ (Second Purchaser's Date of Birth) \_\_\_\_\_





English ▼

**Home (<https://www.flhsmv.gov/>) > Motor Vehicle Check Detail Information**

There is a crash associated with this vehicle. To purchase a copy of the crash report, click here (<https://services.flhsmv.gov/CrashReportPurchasing/>) or contact the reporting agency.

**Vehicle Information**

**Identification Number:** 15GGE181831090685

**Vehicle Type:** BUS

**Year:** 2003

**Make:** GILLIG LLC

**Color:**

**Registration Expiration Date:**

**Title Number:** 88724090

**Previous Title State:**

**Title Status:** ACTIVE

**Title Type:** PAPER TITLE

**Title Issue Date:** 09/04/2003

**Title Print Date:**

**Salvage:**

**Odometer Reading:** 31

**Previous Odometer Reading:**

**Odometer Date:** 07/30/2003

**Previous Odometer Date:**

**Odometer Status:** ACTUAL MILEAGE

**Previous Odometer Status:**

**Total Number of Owners:** 1 Owner

FLHSMV **Net Weight:** 30000

[Español \(/MVCheckWeb/es/Home/Check\)](#) | [More Links](#)

### Lien Information

There are no active liens associated with this vehicle.

### Brand Information

There are no brands associated with this vehicle.

### Stop Information

There are no stops associated with this vehicle.

### Crash Information

Crash records are available for the previous 10 years. If no crash record is located, it does not indicate the absence of a crash.

06/24/2014

KEY WEST POLICE DEPARTMENT

84722164

06/20/2014

KEY WEST POLICE DEPARTMENT

84722135

**If any of the information on this record needs to be corrected**, please contact a Florida driver license and motor vehicle service center and/or tax collector office (<https://www.flhsmv.gov/locations/>).

**Privacy Statement (<https://flhsmv.gov/privacy-statement/>)**

**Email Notice (<https://flhsmv.gov/email-notice/>)**

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# 186021

## Vehicle Information

FDOT Control Number:	186021
Body Manufacturer:	Gillig LLC
VIN:	15GGE181831090685
Chassis Manufacturer:	Gillig LLC
Year:	2003
Model:	G18E102R2
Vehicle Type:	Type A
Tag:	XG4913
Useful Life Standard:	12 Years / 500,000 Miles
Gross Vehicle Weight Rating (lbs):	30,000
Mileage:	104,843
Seating Capacity:	24
Registered Owner:	City of Key West
Special Equipment:	1 wheelchair ramp, 2 wheelchair positions, 1 bike rack

## Grant Information

Cost:	\$255,769.00
Federal Fiscal Year:	
State Fiscal Year:	AI254
Participation:	80% Federal / 10% State
FM Number:	405124719401
Federal Grant Number:	
DUNS Number:	79864898

## Insurance Information

- Valid

## Additional Remarks

# Photos

FDOT Control Number: 186021

	
<p>Front of vehicle is in good condition</p>	<p>Rear of vehicle is in fair condition</p>
	
<p>Driver side of vehicle is in good condition</p>	<p>Passenger side of vehicle is in good condition</p>
<p>Interior of vehicle is in fair condition</p>	

## Florida Department of Transportation

**RON DESANTIS**  
GOVERNOR

1000 NW 111 Avenue  
Miami, FL 33172-5800

**JARED W. PERDUE, P.E.**  
SECRETARY

January 26, 2025

**To: City of Key West - Department of Transportation**  
5701 College Rd, Key West, FL 33040, USA

**Attn:** Carolyn Haia, Grants and Projects Manager

**From:** Mr. Raymond Freeman, Passenger Operations Manager

**Re: Lien Satisfaction - Vh# 186021**

FDOT #	TITLE	VIN#	MODEL	FM#	FED. GRANT #
186021	88/24090	15GGE181831090685	2003/TypeA-TransitBusHeavyDuty_12Years,500kMiles Gillig LLC/ G18E102R2 / 30000/seat capacity:24 Special equipment: 1 wheelchair ramp, 2 wheelchair positions, 1 bike rack	405124/19401	AI254

Dear Mrs. Carolyn,

Attached you will find the Lien Satisfaction for said motor vehicle specified above.

The Lien Release was approved because the vehicle has met it's useful life based on age.

This vehicle is now property of your agency.

**IMPORTANT - FTA REQUIREMENT:**

*FTA Circular 5010.1F (Section IV) – Disposition of Equipment and Supplies*

*If sold at Fair Market Value greater than \$10,000.00 – 80% is to be returned to Federal Transit Authority (FTA) or reinvested in transportation related expenses.*

Sincerely,

DocuSigned by:

*Raymond Freeman*

C25F63C2D45B4DA...

**Mr. Raymond Freeman**

Passenger Operations Manager - District Six

01/26/2026

Date

Aperéz

Enclosures: (1) Certificate of Title and Lien Release package.

Filed: FDOT (J) Drive Lien Release folder