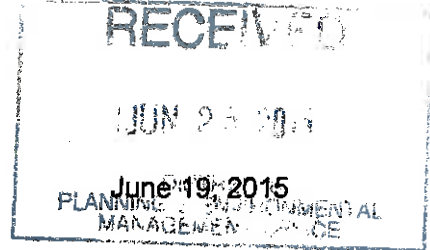


Norman Whitaker
Director
City of Key West
Department of Transportation



P.O. Box 1078
Key West, FL 33040
Phone: (305) 809-3910
Fax: (305) 292-8285

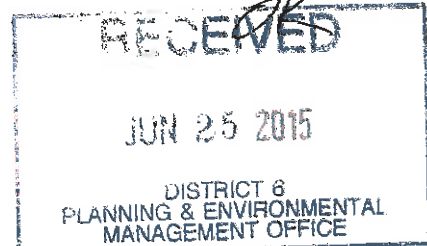
nwhitaker@keywestcity.com



Mr. Raymond Freeman
Transit Programs Administrator
Intermodal Systems Development Office
FDOT / District Six
1000 NW 111 Avenue, Room 6111 RM 6111 - A
Miami, FL 33172

186015

Re: Release of Lien – Out-lived Useful Life – Unit #804
30 foot – Gillig Buses / Catastrophic Breakdowns 4/13/2015



Dear Mr. Freeman:

On April 13, 2015, FDOT Vehicle Asset #010114 a City Bus also known as unit 804 a 2001 – thirty ft. Gillig bus with VIN ID 15GGE181611090407 – suffered a catastrophic engine failure, was removed from service, and served as a parts vehicle ever since. This vehicle began operation in July 2001. At removal from service, this vehicle was two months short of fourteen (14) years old and had over 500,000 miles. It is rendered as a 500,000 mile or twelve year life assigned vehicle, per manufacture documents.

This vehicle is currently thirteen (13) years ten (10) months old and repair is no longer an option. It is in the City of Key West's opinion that this vehicle has reached its maximum life capacity and is a total loss to our future operation periods. On behalf of the City of Key West I am requesting state DOT, D6 Office approve our request to release the City of Key West from any and all liens assigned at this time to allow disposal of Bus Unit 804 as noted above.

If there are any questions, please contact me at any time.

Sincerely,

A handwritten signature in cursive script that reads "Norman Whitaker".

Norman Whitaker
Transportation Director
Key West Transit
627 Palm Ave.
Key West, Fl. 33040
305-809-3918
nwhitaker@cityofkeywest-fl.gov



JON M. AUSMAN
FEDERAL GRANTS MANAGER
OFFICE OF PUBLIC TRANSPORTATION
PUBLIC TRANSIT OFFICE

STATE OF FLORIDA
DEPARTMENT OF TRANSPORTATION
605 SUWANNEE STREET (MS 26)
TALLAHASSEE, FL 32399-0450

TEL: 850-414-4519
FAX: 850-414-4508
jon.ausman@dot.state.fl.us

CERTIFICATE OF TITLE

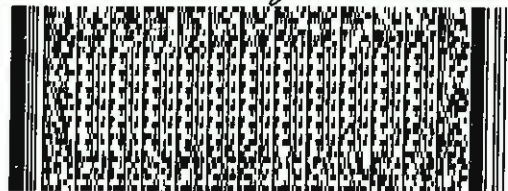
SATISFACTORY PROOF OF OWNERSHIP HAVING BEEN SUBMITTED UNDER SECTION 319.23/328.03, FLORIDA STATUTES, TITLE TO THE MOTOR VEHICLE OR VESSEL DESCRIBED BELOW IS VESTED IN THE OWNER(S) NAMED HEREIN, THIS OFFICIAL CERTIFICATE OF TITLE IS ISSUED FOR SAID MOTOR VEHICLE OR VESSEL.

IDENTIFICATION NUMBER 15GGE181611090407		YR. 2001	MAKE GLLG	MODEL	BODY BU	WT-L-BHP	VESSEL REGIS NO.	TITLE NUMBER 83787059
PREV STATE N	COLOR	PRIMARY BRAND	SECONDARY BRAND		NO OF BRANDS	USE PVT		PREV ISSUE DATE
ODOMETER STATUS OR VESSEL MANUFACTURER 28 MILES 06/25/2001 ACTUAL					HULL MATERIAL	PROP	DATE OF ISSUE 08/07/2001	

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

LIEN RELEASE
INTEREST IN THE ABOVE DESCRIBED VEHICLE IS HEREBY RELEASED
BY *Janell Newman Esq*
Wanda Knight Manager
TITLE *7/29/2001* DATE

1ST LIENHOLDER
**06/25/2001
FLORIDA DEPARTMENT OF TRANSPORTATION
605 SUWANNEE STREET MS 26
TALLAHASSEE FL 32399-8544**



DIVISION OF MOTOR VEHICLES TALLAHASSEE FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Carl A Ford Control Number **50968396** *Fred O Dickenson III*
CARL A. FORD DIRECTOR FRED O. DICKINSON III EXECUTIVE DIRECTOR

TRANSFER OF TITLE BY SELLER
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 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: _____

I/We state that this 5 or 8 digit odometer now reads for _____ 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.

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: _____
Selling Dealer's License Number: _____	Tax No: _____
Auction Name: _____	License Number: _____
	Tax Collected: \$ _____

VOID IF WATERMARKED

VOID IF WATERMARKED

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 Tenth) 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 _____

Action 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 Tenth) 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 _____

Action 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 Tenth) 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 _____

Action Name (When Applicable) _____ License Number _____

APPLICATION FOR TITLE BY PURCHASER

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

I make application for a new certificate of title and registration transfer, if applicable, for said motor vehicle or vessel which now has been as follows: (Date, name and address of each holder, if NONE, write NONE. Record optional liens on Form DMV 82139 FEID# _____ FL/DL# _____ and _____ Date of Birth _____ State _____ Zip _____)

Address _____

THIS VEHICLE WILL BE USED AS TAXICAB POLICE CAR LEASED PRIVATE

I/WR HEREBY CERTIFY THAT THE VEHICLE WILL NOT BE OPERATED ON THE PUBLIC HIGHWAYS OF THIS STATE

I/We state that this 5 or 6 digit odometer now reads _____ (no Tenth) 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 (Florida DL# or FEID#) (Second Purchaser's Date of Birth)