

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 15GGE181131090687		YR 2003	MAKE GLLG	MODEL	BODY BU	WT-L-BHP 30000	VESSEL REGIS NO.	TITLE NUMBER 88726194
PREV STATE N	COLOR	PRIMARY BRAND	SECONDARY BRAND		NO OF BRANDS	USE PVT	PREV ISSUE DATE	
ODOMETER STATUS OR VESSEL MANUFACTURER OR OH USE 24 MILES		07/30/2003 ACTUAL		HULL MATERIAL	PROP	DATE OF ISSUE 09/04/2003		

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 *Fred O. Dickinson*
Transit Oversight 107-25
 TITLE *Coordinator* DATE

1ST LIENHOLDER
07/30/2003
FL DEPT OF TRANSPORTATION
MS 26 605 SUWANNEE STREET
TALLAHASSEE FL 32399-0450



DIVISION OF MOTOR VEHICLES TALLAHASSEE FLORIDA

DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES

Carl A. Ford
 CARL A. FORD
 DIRECTOR

Control Number **62645900**

Fred O. Dickinson
 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 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 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.

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 _____

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

Tax No. _____ Tax Collected \$ _____

Auction Name _____ License Number _____

HSMV 82250 (REV. 12/02)

STATE OF FLORIDA

VOID IF ALTERED

VOID IF ALTERED

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 _____
 Lienholder's Name: _____ Date of Lien: _____
 Address: _____ State: _____ Zip: _____
 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 (Florida DL# or FEID#) (Second Purchaser's Date of Birth)



FLORIDA HIGHWAY SAFETY AND MOTOR VEHICLES

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: 15GGE181131090687

Vehicle Type: BUS

Year: 2003

Make: GILLIG LLC

Color:

Registration Expiration Date:

Title Number: 88726194

Previous Title State: FLORIDA

Title Status: ACTIVE

Title Type: PAPER TITLE

Title Issue Date: 09/04/2003

Title Print Date:

Salvage:

Odometer Reading: 24

Previous Odometer Reading:

Odometer Date: 07/30/2003

Previous Odometer Date:

Odometer Status: ACTUAL MILEAGE

Previous Odometer Status:

Total Number of Owners: 1 Owner

Net Weight: 30000
FLHSMV

[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.

09/29/2019

KEY WEST POLICE DEPARTMENT

89083641

08/05/2019

KEY WEST POLICE DEPARTMENT

89083372

12/27/2018

KEY WEST POLICE DEPARTMENT

87794659

FLHSMV

10/09/2015

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

KEY WEST POLICE DEPARTMENT

84724750

04/11/2015

KEY WEST POLICE DEPARTMENT

84723797

Showing 1 to 5 of 7 View ▾

« < 1

2 ([/MVCheckWeb/en/Home/Check?
vehicleNumber=210280518&CrashGridPage=2&activeGrid=CrashGrid](/MVCheckWeb/en/Home/Check?vehicleNumber=210280518&CrashGridPage=2&activeGrid=CrashGrid))

> ([/MVCheckWeb/en/Home/Check?
vehicleNumber=210280518&CrashGridPage=2&activeGrid=CrashGrid](/MVCheckWeb/en/Home/Check?vehicleNumber=210280518&CrashGridPage=2&activeGrid=CrashGrid))

» ([/MVCheckWeb/en/Home/Check?
vehicleNumber=210280518&CrashGridPage=2&activeGrid=CrashGrid](/MVCheckWeb/en/Home/Check?vehicleNumber=210280518&CrashGridPage=2&activeGrid=CrashGrid))

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/>).

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186023

Vehicle Information

FDOT Control Number:	186023
Body Manufacturer:	Gillig LLC
VIN:	15GGE181131090687
Chassis Manufacturer:	Gillig LLC
Year:	2003
Model:	G18E102R2
Vehicle Type:	Type A
Tag:	XG4915
Useful Life Standard:	12 Years / 500,000 Miles
Gross Vehicle Weight Rating (lbs):	30,000
Mileage:	222,246
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

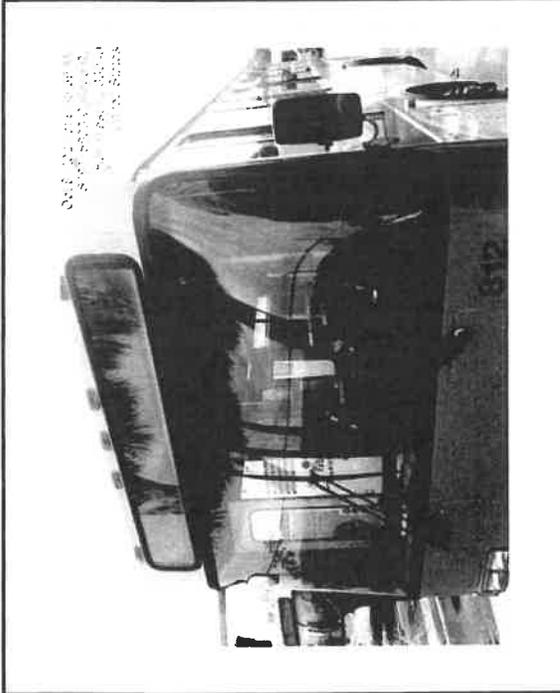
Insurance Information

- Valid

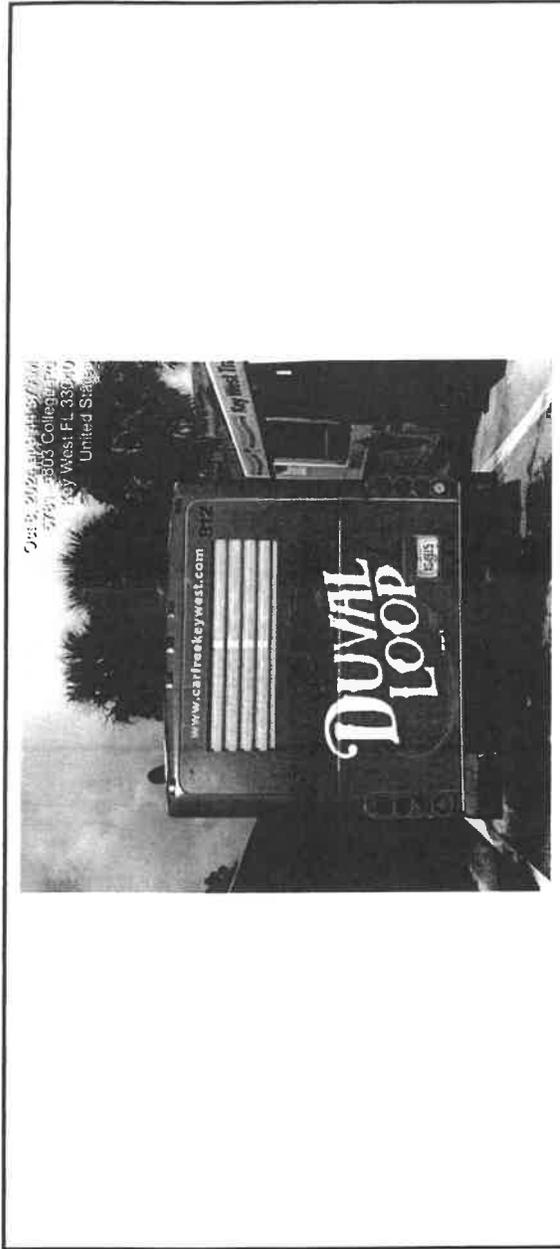
Additional Remarks

Photos

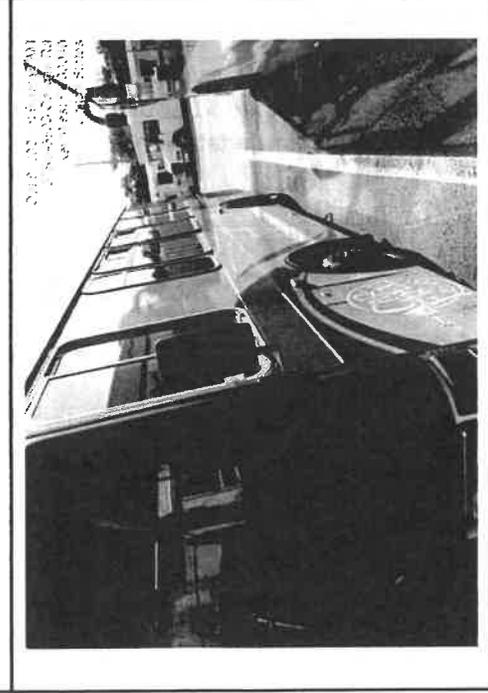
FDOT Control Number: 186023



Front of vehicle is in good condition



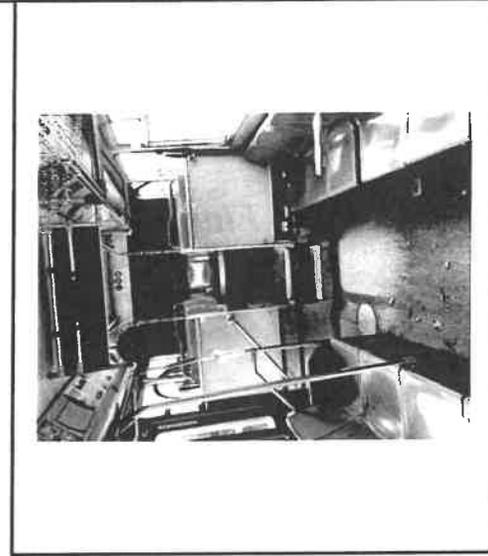
Rear of vehicle is in good condition



Driver side of vehicle is in good condition



Passenger side of vehicle is in good condition



Interior of vehicle is in fair condition



Florida Department of Transportation

RON DESANTIS
GOVERNOR

1000 NW 111 Avenue
Miami, FL 33172-5800

JARED W. PERDUE, P.E.
SECRETARY

October 30, 2025

To: City of Key West - Department of Transportation
5701 West College Road, Key West, Florida, 33040

Attn: Carolyn Haia, Grants Manager

From: Mr. Raymond Freeman, Passenger Operations Manager

Re: Lien Satisfaction - Vh# 186023

FDOT #	TITLE	VIN#	MODEL	FM#	FED. GRANT #
186023	88726194	15GGE181131090687	2003/TypeA- Heavy Duty Bus-12years/500k miles Gillig LLC/ G18E102R2/ 30,000/seat capacity:24 Special equipment: 1 wheelchair ramp, 2 wheelchair positions, 1 bike rack	405124719401	AI254

Dear Ms. Haia,

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

The Lien Release was approved as the agency justified the high maintenance cost of the vehicle.

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

C25F63C2B46B4DA

Mr. Raymond Freeman

Passenger Operations Manager - District Six

10/30/2025

Date

Aperez

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

Filed: FDOT (J) Drive Lien Release folder