## Florida Personal Property Bill of Sale Form

Date of Sale (mm/dd/yyyy)  Seller Information		
Full Name:	Full Name:	
Street Address:	Street Address:	
City:	City:	
State:	State:	
ZIP:	ZIP:	
Phone Number:	Phone Number:	
Email Address:	Email Address:	
Description of Property		
Item Description:		
Make:		
Model:		
Year:		
Serial Number:		
Color:		
Additional Description:		
Purchase Information		
Purchase Price: \$	<del></del>	
Payment Method:		

□ Cash
☐ Cashier's Check
☐ Money Order
☐ PayPal
☐ Other:
Terms and Conditions
As-Is Condition: The property described above is sold "as is," without any warranties or guarantees, either expressed or implied, including but not limited to any warranty of condition, merchantability, or fitness for a particular purpose. The Buyer acknowledges that they have inspected the property and accept it in its current condition.
Title and Ownership: The Seller certifies that they are the legal owner of the property and have the authority to sell it. The Seller further certifies that the property is free from any liens or encumbrances, except as noted in this Bill of Sale.
Liability: The Buyer agrees to assume all responsibility and liability for the property upon execution of this Bill of Sale and transfer of possession.
Signatures
The undersigned Seller certifies that the information provided above is accurate to the best of their knowledge. The Buyer acknowledges receipt of this Bill of Saland accepts the property in its current condition.
Seller's Signature:
Date:
Printed Name:

Buyer's Signature:	
Date:	
Printed Name:	
Notary Acknowledgment	
State of Florida	
County of	
On this day of,	20, before me personally appeared
(Seller's Name) and	(Buyer's Name), to me known to be the
individuals described in and	who executed the foregoing instrument, and
acknowledged that they exec	cuted the same as their free act and deed.
Notary Public Signature:	
My Commission Expires:	
Additional Information	
Any additional information o	r special conditions related to this sale can be noted
here:	