

# Florida Dealership VIN Inspection Statement

\_\_\_\_\_  
Dealership Name

\_\_\_\_\_  
Dealership Address

\_\_\_\_\_  
Dealership Phone Number

To Whom It May Concern,

The \_\_\_\_\_ was inspected by an  
(Year, Make, Model, & VIN)

associate of \_\_\_\_\_ on \_\_\_\_\_.  
(Dealership Name) (Date)

Dealership Associate Name: \_\_\_\_\_

Seller Signature: \_\_\_\_\_

Seller Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Buyer Signature: \_\_\_\_\_

Buyer Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_