



Citation Processing Center  
P. O. Box 4460  
Clearwater, FL 33758-4460

### TRANSFER OF LIABILITY

Parking Citation Number: \_\_\_\_\_

Name and complete address of Vehicle Registered Owner: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

At the time the violation on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the vehicle with license plate number \_\_\_\_\_, issued by the State of \_\_\_\_\_, was in the custody or care of the individual while complete name and address is listed as:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

and whose driver license number is \_\_\_\_\_.

\_\_\_\_\_  
Signature of Affiant  
Sworn to (or affirmed) and subscribed before me

This \_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
By \_\_\_\_\_  
\_\_\_\_\_  
Notary Public

Personally known \_\_\_\_\_ or produced identification \_\_\_\_\_

Type of identification produced \_\_\_\_\_