



ANNE M. GANNON

CONSTITUTIONAL TAX COLLECTOR

Serving Palm Beach County

Governmental Center • 301 N. Olive Avenue, 3rd Floor • West Palm Beach, FL 33401
Mailing Address • Post Office Box 3715 • West Palm Beach, FL 33402-3715
www.pbctax.gov • Tel (561) 355-2264 • Fax (561) 355-4123

Request For Electronic Title By Mail

In order for the Palm Beach County Tax Collector's office to print and mail your electronic title to you, your name must appear as the current titled owner of the below described vehicle.

ALL of the following items **MUST** be included with your request; otherwise it will be rejected.

1. This form completed in full by the applicant, who is the titled owner of record.
2. A photo copy of the front of the applicant/owner(s) valid driver license or identification card.
3. Check or Money Order (for only one amount checked below), made payable to: **Tax Collector, Palm Beach County**

A title can also be requested online at <https://services.flhsmv.gov/virtualoffice/> that will be mailed from the Florida Highway Safety and Motor Vehicles (FLHSMV) in Tallahassee within (7 – 10) business days using a credit card.

Method of Delivery Options (Please check one):

1. USPS REGULAR MAIL via FLHSMV

The title will be mailed by FLHSMV within (2 - 5) business days of processing the request.		
Title Fee		Total
\$2.50		\$2.50

-or-

2. USPS REGULAR MAIL via Tax Collector

The title will be mailed from Tax Collector's office next business day.		
Title Fee		Total
\$10.00		\$10.00

1. APPLICANT/OWNER INFORMATION					
Printed Name of Applicant/Owner:	E-mail:	Daytime Phone:			
Mailing Address (must match address of record):	City:	State:	Zip:		
2. VEHICLE INFORMATION					
VIN (Vehicle Identification Number):	Year:	Make:			
3. APPLICANT'S CERTIFICATION					
I am the current titled owner of the described vehicle. I am requesting FLHSMV or the Palm Beach County Tax Collector's office to print and mail my title for the described vehicle to the mailing address of record indicated above.					
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.					
Signature of Applicant/Owner:		Date:			

MAIL TO: Palm Beach County Tax Collector • 301 N. Olive Avenue, 3rd Floor • West Palm Beach, FL 33401
PHONE: (561) 355-2264 **EMAIL:** ClientAdvocate@pbctax.com