

FLORIDA EQUIPMENT BILL OF SALE

This Bill of Sale is made on _____ (date) between the following parties:

Seller Information

Name: _____
Address: _____
City/State/ZIP: _____
Phone/Email: _____

Buyer Information

Name: _____
Address: _____
City/State/ZIP: _____
Phone/Email: _____

Equipment Details

- Equipment Type: _____
- Make/Brand: _____
- Model: _____
- Serial Number: _____
- Year: _____
- Condition: _____
- Additional Description: _____

Sale Information

- Sale Price: \$ _____
- Payment Method: Cash Check Bank Transfer Other: _____
- Date of Sale: _____

Ownership & Condition

The Seller certifies that they are the lawful owner of the equipment and that it is free from all liens and encumbrances, unless otherwise stated: _____

The equipment is sold "**AS IS**", without any warranties, either expressed or implied.

Signatures

Seller Signature: _____ Date: _____

Buyer Signature: _____ Date: _____

Witness (Optional): _____ Date: _____