

APPLICATION FOR LICENSE PLATE/DECAL REFUND

This application, along with the registration certificate showing taxes paid and all other supporting documentation must be submitted to the address reflected above. The license plate/decals must also be submitted with the application or turned in to the Tax Collector's office for cancellation.

I. Vehicle Description

The vehicle/mobile home/vessel described below is or was registered in my name.

Year	Make	Vehicle/Mobile Home/Vessel Identification Number	License Plate or Decal #

II. REASON FOR REFUND – Check reason for refund request.

- Vehicle License Plate or Vessel/Mobile Home Decal Surrendered Prior to Effective Date of Registration** (The effective date is the 1st day of the first month of the licensing period.) **THERE IS NO PROVISION IN FLORIDA LAW FOR PRORATED REFUNDS. THE LICENSE PLATE/MOBILE HOME DECAL MUST BE SURRENDERED PRIOR TO THE EFFECTIVE DATE TO QUALIFY FOR A REFUND.**
 - Mobile Home/Travel Trailer Declared as Real Property** (Submit copies from the Property Appraiser's Office of the completed Declaration of Mobile Home/Travel Trailer stating the year declared as Real Property along with previously issued mobile home decals and copies of current RP registrations.)
 Indicate RP decal number(s):
 - Two License Plates/Decals Purchased for Same Vehicle/Mobile Home/Vessel** (Submit a copy of the current registration for license plate/decals being retained) If a Temporary Operational Permit (TOP) has been purchased and an application for an apportioned International Registration Plan (IRP) plate has been submitted, the IRP plate and cab card must be received by applicant prior to applying for refund.
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|--|---|---|---|
| License Plate number/
Registration number
Currently in use | <input style="width: 100%;" type="text"/> | License Plate Number/
Registration Number
Being Surrendered | <input style="width: 100%;" type="text"/> |
| And/or Decal | <input style="width: 100%;" type="text"/> | and/or Decal | <input style="width: 100%;" type="text"/> |
| Expiration Date | <input style="width: 100%;" type="text"/> | Expiration Date | <input style="width: 100%;" type="text"/> |
- Note:** IF A NEW FLORIDA LICENSE PLATE HAS BEEN ISSUED FOR A VEHICLE AND A CURRENT FLORIDA LICENSE PLATE/DECAL HAS BEEN OR CAN BE TRANSFERRED TO THE SAME VEHICLE, SUBMIT A COPY OF THE REGISTRATION FOR THE NEW LICENSE PLATE, A COPY OF THE REGISTRATION FOR THE CURRENT LICENSE PLATE/DECAL PRIOR TO TRANSFER, AND A COPY OF THE REGISTRATION AFTER TRANSFER.
- Initial Registration Fee (\$100.00 or \$225.00)** Do not check this box if your registration does not reflect the initial registration fee was paid. Submit a copy of the registration indicating the fee was paid and submit proof the vehicle was disposed of within 3 months of paying the fee; for example, copy of front and back of the title transferred to purchaser or a copy of the bill of sale.

III. Owner Information – Please Type or Print Clearly – All correspondence, including any refund, will be mailed to the address below.

Name of Registered Owner(s): <input style="width: 90%;" type="text"/> Street Address: <input style="width: 95%;" type="text"/> City: <input style="width: 200px;" type="text"/> State: <input style="width: 100px;" type="text"/> Zip Code: <input style="width: 100px;" type="text"/> Email Address: <input style="width: 95%;" type="text"/> Signature of Registered Owner: _____ Date: <input style="width: 100px;" type="text"/>	<table border="1" style="width: 100%; height: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 5px;">DMV USE ONLY</td> </tr> <tr> <td style="height: 150px;"></td> </tr> </table>	DMV USE ONLY	
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IV. TAX COLLECTOR USE ONLY

The license plate/decals indicated below was surrendered to this office and entered in FRVIS as surrendered/cancelled as required.

License Plate Number	<input style="width: 100%;" type="text"/>	Decal Number	<input style="width: 100%;" type="text"/>	Expiration Date	<input style="width: 100%;" type="text"/>	Date Received	<input style="width: 100%;" type="text"/>
County/Agency Number	<input style="width: 100%;" type="text"/>	Tax Collector's Name Stamp, Seal or Signature					
Signature: _____							

If the refund is being requested due to a tax collector error, please attach a detailed explanation on tax collector letterhead paper.