Security Deposit Refund Request

We will begin the refund process of your security deposit upon receipt of this completed form. Please note that the refund cannot be processed by the department until one year has elapsed from the date the money was deposited. If all requirements for refunding are met, we will process your refund request. We will advise you in writing if for any reason we are not able to process the refund. All security deposits unclaimed after five years from the date of deposit are transferred to the State School Fund and are no longer available for refund pursuant to Section 324.061(2)(e) Florida Statutes.

The following information is needed before we can return the deposit:

1. Full Name (print) ____________________________________________________________
2. Current Mailing Address: __________________________________________________
   City: __________________ State: ______________ Zip Code: ________________
3. The Financial Responsibility Case Number: ____________________________________
4. The Amount of the Security Deposit: _________________________________________
5. Deposit Date: _____________________________________________________________
6. Driver License or Florida Identification Card Number: ___________________________
7. Depositor’s Signature: _____________________________________________________

Mail this form along with a copy of your Driver License or Identification Card to the office listed below. Please allow three (3) to four (4) weeks for processing.

Department of Highway Safety and Motor Vehicles
Bureau of Motorist Compliance
Neil Kirkman Building
2900 Apalachee Parkway, Room A212, MS 98
Tallahassee, Florida 32399-0585

HSMV 74007 (7/11)