

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTORIST SERVICES
2900 Apalachee Parkway, MS-98
Tallahassee, FL 32399

Notification of Dispute of Registration Fees Paid to a Dealer for a Motor Vehicle

In accordance with section 320.02(17)(a), Florida Statutes, this statement serves as notice to the department that registration fees for the vehicle described below are in dispute. Submit the completed form and documentary proof that the registration fees have been paid to the dealer for the disputed amount.

Title Number		Identification Number		Date Purchased
Year:	Make	Color	Type:	

Owner's Name:			Co-Owner's Name:		
Owner's Address:			Co-Owner's Address:		
City	State	Zip	City	State	Zip
Owner's Telephone Number:			Co-Owner's Telephone Number:		

Dealer's Name:	Dealer License Number:
Dealer Address:	Dealer Phone Number:
Registrations Fees Due \$	Fees Collected \$

Explanation of disputed registration fees:

Signature(s) _____
Date

To be completed by Division of Motorist Services

Registration was withheld Yes No

Motor Vehicle Owners were notified of dispute on _____

Dispute settled on _____

Proper registration fees paid on _____ Amount Paid \$ _____

Registration mailed to owners on _____