## Florida Department of Highway Safety and Motor Vehicles Receipt and Certificate of Disposal for Obsolete License Plates



HIGHWAY SAFETY AND MOTOR VEHICLES

The License Plates listed below were surrendered by one of the following:

Once completed, please fax, mail, or email to:

## **Revenue Audit Section**

Fax: (850) 617-5219

Mail to: Division of Motorist Services

Neil Kirkman Bldg., MS #24

Tallahassee, FL 32399

Email: RevenueAudit@flhsmv.gov

(Name of Tax Collector/License Plate Agent and Agency #)			(Signature of Agency Employee)		
(Name of Driver License Office)			(Signature of DL Employee)		
(Name of Dealership and County Location)			(Signature of the Dealership's Employee)		
(Other Source)			(Signature of the Employee)		
Beginning License Plate Number	Ending License Plate Number	Total	Beginning License Plate Number	Ending License Plate Number	Total

**Grand Total** 

**Grand Total** 

## Florida Department of Highway Safety and Motor Vehicles

Plates received by:		
	(Name of Vendor/Company)	(Date Received)
I certify that these lice procedures.	ense plates have been destroyed by me in	accordance with Department
(Name of Ver	ndor Employee)	(Date of Disposal)

Submit a copy with Plates to Pride. The surrendering Tax Collector, License Plate Agent, or DMS office must retain a copy of the completed form for their records for 12 months.