



## Receipt and Certificate of Disposal for Obsolete License Plates

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

\_\_\_\_\_  
(Name of Tax Collector/License Plate Agent and Agency #)

\_\_\_\_\_  
(Signature of the Agency Employee)

\_\_\_\_\_  
(Name of Driver License Office)

\_\_\_\_\_  
(Signature of the 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
<b>GRAND TOTAL</b>			<b>GRAND TOTAL</b>		

Plates received by: \_\_\_\_\_  
(Name of Vendor/Company)
(Date Received)

I certify that these license plates have been destroyed by me in accordance with Department procedures.

\_\_\_\_\_  
(Name of Vendor Employee)
(Date of Disposal)

Once completed, please fax, mail, or email to the Revenue Audit Section:  
**Fax:** (850) 617-5219     **Mail to:** Division of Motorist Services     **Email:** [RevenueAudit@flhsmv.gov](mailto:RevenueAudit@flhsmv.gov)  
 Neil Kirkman Bldg, MS #24  
 Tallahassee, FL 32399

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.