

**APPLICATION FOR REFUND
 (PART 2)**

Must be submitted to:
 Department of Motor Vehicles
 P.O. Box 942869 MS A235
 Sacramento, CA 94269-0001

DMV USE ONLY	
RECEIVED AND DESTROYED STICKER NO. HERE	
YEAR _____	
WARRANT NO. (ACCOUNTING USE ONLY): _____	
DATE DMV RECEIVED REFUND REQUEST _____	
BUSINESS INDICATOR:	
<input type="checkbox"/> B	<input type="checkbox"/> I

APPLICANT INFORMATION

1. NAME (LAST, FIRST, MI)				
2. MAILING ADDRESS		3. CITY	STATE	ZIP
4. VIN/HIN (LAST 3 CHARACTERS)	5. REFUND REGARDING (COMPLETE NAME)	6. LICENSE PLATE, ACCOUNT OR RECEIPT NO.	6a. <input type="checkbox"/> REGISTRATION <input type="checkbox"/> DRIVER <input type="checkbox"/> OCCUPATIONAL <input type="checkbox"/> MISC.	
7. DATE FEES WERE PAID (MM/DD/YYYY)	8. OFFICE WHERE FEES WERE PAID	9. WERE FEES PAID BY CREDIT CARD? <input type="checkbox"/> Yes <input type="checkbox"/> No	10. AMOUNT OF CLAIM	

11. A REFUND OF FEES IS BEING REQUESTED BECAUSE:

I am in the military and not a California resident. (Please attach completed and signed Certificate of Nonresident Military Exemption form).

Vehicle/vessel left California on/last operated in California on _____ and fees were paid on _____ .
DATE DATE

Vehicle/vessel was sold wrecked stolen on _____ and fees were paid on _____ .
DATE DATE

VLF Offset Refund Request (VLF Increase)*

Other (please explain briefly).

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

12. DATE	13. SIGNATURE OF APPLICANT X	14. DAYTIME TELEPHONE NO. ()
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FOR DMV USE ONLY

SUB M FEE CLEARANCE INFO				REPORTING UNIT NO.	TYPE LICENSE	TOTAL REFUND:	
FEE CODES + Waiver/County	REFUND AMOUNT	FEE CODES + Waiver/County	REFUND AMOUNT	FEE CODES + Waiver/County	REFUND AMOUNT	FEE CODES + Waiver/County	REFUND AMOUNT
A - (008)		Q63- (088)					
P - (031)		Q64- (089)					
G - (069)		N- (093)					
D - (074)		U- (094)					
L - (075)		001					
J - (076)		002					
T - (083)		003					
B - (084)		00L-					
Q - (085)		VL2-					
S - (086)							
V - (087)							

FTB	VLF OFFSET	VLF PENALTY OFFSET	WAIVER CODE	DMV APPROVALS (LEGIBLE SIGNATURE REQUIRED)	DATE
				TECHNICIAN X	
				SUPERVISOR X	
				MANAGER X	

REBATE	2001 AMT	PENALTY
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