REGISTRATION FEE REFUND



REQUEST/AUTHORIZATION

PLEASE PRINT OR TYPE

VTR-304 (Rev 11/09)

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TO:** |       | , | TAX ASSESSOR-COLLECTOR |  |
|  |       | / |       | COUNTY/NUMBER |  |
|  |       | ADDRESS |  |
|  |       | CITY/STATE/ZIP |  |
|  |  | AC/PHONE |     | / |       |

|  |  |  |
| --- | --- | --- |
| BY AUTHORITY OF THE TEXAS TRANSPORTATION CODE §502.183 A REFUND OF REGISTRATION FEES IS ISSUED TO THE OWNER OR AUTHORIZED AGENT OF THE FOLLOWING VEHICLE FOR THE: **[ ]  PLATE** **[ ]  STICKER** **[ ]  PLATE AND STICKER** **[ ]  CAB CARD****ALL APPLICABLE EVIDENCE SUCH AS PLATE, STICKER, AND/OR LICENSE RECEIPT MUST BE ATTACHED BEFORE AUTHORIZATION IS GRANTED.** | AUTHORIZED REGISTRATION FEE |  |
| $ |       |  |
| LIST OTHER FEES |  |
| $ |       |  |
| $ |       |  |
| $ |       |  |
| $ |       |  |
| $ |       | LOCAL FEES\* |  |
| $ |  | **GRAND TOTAL** |  |
|  |
| **\*AUTHORIZATION FOR REFUND OF LOCAL FEES MUST BE MADE BY THE COUNTY** |
|  | VEHICLE INFORMATION                        |  |
|  | LICENSE PLATE NUMBER YEAR/MAKE STICKER NUMBER EXPIRATION MONTH/YEAR |  |
|  |             |  |
|  | VEHICLE IDENTIFICATION NUMBER DOCUMENT NUMBER |  |
|  | OWNER INFORMATION      (   )       |  |
|  | REGISTERED OWNER PHONE NUMBER |  |
|  |             |  |
|  | STREET ADDRESS CITY/STATE/ZIP |  |
|  |             |  |
|  | MAILING ADDRESS CITY/STATE/ZIP |  |
|  |  |  |
|  | SIGNATURE OF OWNER OR AUTHORIZED AGENT REQUESTING REFUND |  |
|  | **REASON FOR REFUND**  |  |
|  | **ON**       **THE VEHICLE WAS** | **[ ]  \*SOLD** **[ ]  \*JUNKED** |  |
|  |  **\*** DATE PRIOR TO THE EFFECTIVE DATE OF REGISTRATION |  |  |
|  | **[ ]  WRECKED** |       | NOTE: VEHICLES WRECKED AFTER THE EFFECTIVE DATE MUST APPLY FOR A CREDIT FEE VOUCHER (FORM VTR-50) IF SUFFICIENT REGISTRATION REMAINS. |  |
|  | DATE  |  |
|  | **OR THE VEHICLE WAS:** | **[ ]  DOUBLE REGISTERED [ ]  REGISTERED IN ERROR [ ]  OTHER** |  |
|  | **REMARKS:** |       |  |
|  |  |  |
|  **🡻 COUNTY USE ONLY 🡻 APPROVAL 🡻 VTR USE ONLY 🡻** |
|  |  |  |  | **APPLICATION RECEIVED [ ]  IN PERSON [ ]  BY MAIL**RECORD UPDATED **[ ]  YES [ ]  NO**AUTHORIZED REFUND **[ ]  FULL [ ]  PARTIAL** |  |
|  |       |  |  |  |
|  | RTS TRANSACTION NUMBER |  |  |  |
|  |  |  |  |  |
|  | SIGNATURE OF AUTHORIZED COUNTY PERSONNEL |  |  |  |
|  |             |  |  |             |  |
|  | DATE REFUND ISSUED TO APPLICANT CHECK # |  |  | RTS AUTHORIZATION DATE REGIONAL OFFICE /PHONE |  |
|  |  |  |  |  |  |
|  | SIGNATURE OF OWNER OR AGENT RECEIVING REFUND |  |  | AUTHORIZED SIGNATURE FOR THE VEHICLE TITLES AND REGISTRATION DIVISION |  |
|  |  |  |  |  |  |