

## REGISTRATION FEE REFUND REQUEST FORM

### NRS 482.399

#### Instructions

1. The request must be made at the time the registration is cancelled.
2. The license plates must be surrendered.
3. Applicant must be a resident of Nevada.
4. The refund amount must exceed \$100.
5. If documentation is not presented or attached to the request it will be deemed incomplete and will be denied

At least one of the following criteria must be met to qualify for a refund. Check the box(es) that applies to your situation:

- Applicant's driver's license must have recently been relinquished **and** has sold or otherwise disposed of their vehicle; or
- The vehicle has been determined to be inoperable **and** the applicant does not transfer the registration to another vehicle. If the vehicle is inoperable and not economical to repair, an estimate from a motor vehicle repair shop or garage is required; or
- The owner of the vehicle is seriously ill or has died **and** the guardians or survivors have sold or otherwise disposed of the vehicle.

Present original receipts and/or documentation to verify circumstance and time frames.

#### Vehicle Information

Vehicle Identification Number

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Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_

License Plate Number \_\_\_\_\_

#### AFFIDAVIT OF SALE

*Please Print or Type*

I certify under penalty or perjury under the laws of the State of Nevada, that I have sold the described vehicle to \_\_\_\_\_ on \_\_\_\_\_  
Name of buyer(s) (Date)

Printed Name of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Physical Address \_\_\_\_\_  
Address City State Zip Code

Mailing Address \_\_\_\_\_  
Address City State Zip Code

#### For Office Use Only

Approved  Denied

Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Office \_\_\_\_\_ Phone \_\_\_\_\_