

853D

STATE OF ALASKA
 Department of Administration
 Division of Motor Vehicles
 Fax 333-8615
 3901 Old Seward HWY STE 101
 Anchorage, Alaska 99503-3600

Request for Refund - Dealers

DEALER NAME:		
MAILING ADDRESS:		
CITY:	STATE:	ZIP:
EMAIL:		
PLATE NUMBER:		
<p><i>Refunds are normally issued only to the registered owner. We may refund fees to a dealer if the dealer provides one of the following:</i></p> <ol style="list-style-type: none"> 1. <i>The dealer provides a copy of the sales agreement showing the amount of fees collected for DMV.</i> 2. <i>The dealer provides a copy a check showing the fees have already been reimbursed to the registered owner.</i> 3. <i>The refund request is signed by the registered owner with the statement, "Issue Refund to Dealer."</i> 		
REASON FOR REFUND:	REFUND AMOUNT REQUESTED: \$ _____	
<p>Supporting Documentation (check one – copies must be included with refund request):</p> <p><input type="checkbox"/> Copy of sales agreement showing amount of DMV fees collected from registered owner.</p> <p><input type="checkbox"/> Copy of check showing fees have been reimbursed to registered owner.</p> <p><input type="checkbox"/> Registered owner agrees to refund being issued to dealer.</p> <p style="padding-left: 40px;"><i>"Please issue refund to Dealer"</i></p>		
_____	_____	
Registered Owner's Name (print)	Registered Owner's Signature	
Please allow 12 weeks for processing.		

The facts given above are true and complete.

Date:	SIGNATURE:
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..... **FOR OFFICIAL USE ONLY**

AUDITED _____ APPROVED _____ DENIED _____

AKSAS CODING: _____ \$ _____

ALVIN CODING: _____ \$ _____

_____ \$ _____

_____ \$ _____

DATE STAMP