



CUSTOMER REFUND REQUEST

State of Alaska - Dept. of Administration
Division of Motor Vehicles
1300 W. Benson Blvd., Ste. #400
Anchorage, AK 99503-3692
Phone: (907) 269-5019 / Fax: (907) 333-8615
EMAIL: DOA.DMV.FISCAL@ALASKA.GOV

Division of **MOTOR VEHICLES**

Customer Name: _____

Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ EMAIL: _____

DRIVER LICENSE NUMBER: _____ PLATE NUMBER: _____

Alaska Administrative Code 2AAC92.150 (h) requires we send your refund to the address on record. To update your address please visit your local DMV or go online at: [http:// DOA.Alaska.GOV/DMV](http://DOA.Alaska.GOV/DMV)

Reason For Request	_____

Refund Amount: \$ _____	

PLEASE READ CAREFULLY REGARDING OUR REFUND POLICY

- * Please allow 12 weeks for processing of refund requests.
- * Fees collected for online driving records are non-refundable.
- * Road test fees are non-refundable *UNLESS* a DMV representative cancels the test.
- * Fees are not prorated: "*unused*" portions of the fee are not refunded.
- * Fees for personalized plate requests are non-refundable unless the plate selection is rejected by DMV and the rejection letter is *included* with this request.
- * Original tabs must be received for consideration of registration refunds.

Authorization: The Facts Provided are True and Correct:

Date: _____ Signature: _____

Refund Requests should be faxed, mailed or emailed to the address listed above.

FOR OFFICIAL USE ONLY			
Audited: _____	Approved: _____	Denied: _____	
IRIS Coding: _____	ID: _____	Amount: \$ _____	
ALVIN Coding: _____	\$ _____ / _____	\$ _____ / _____	\$ _____ / _____