Division of Vehicles 300 SW 29<sup>th</sup> Street Topeka KS 66611



Phone: 785-296-3963 www.ksrevenue.org Laura Kelly, Governor

Mark Beshears, Secretary

## STATE PROCESSED VEHICLE REFUNDS

Refund of Truck Registration of 16M or More,  $\,\&/or$ 

REFUND OF 5-YEAR TRAILER REGISTRATION OF 12M OR MORE

| OWNER INFORMATION   |  |                               |                  | PLEASE 7       | TYPE OR PRINT    |
|---|--|-------------------------------|------------------|----------------|------------------|
| Driver License No.  | Registered Own   | er's Name P                   | Phone Number     | Social Seco    | urity# or FEIN   |
|   | , and the second |                               |                  | KS             | ·                |
| Mailing Address for Refund  |  | City                          |                  | State          | ZIP              |
| VEHICLE INFORMATION   |  |                               |                  |                |                  |
|   |  |                               |                  |                |                  |
| Year  | Make   |                               | VIN              |                |                  |
| Registration Year   | Lic  | ense Plate Number             | Ι                | Declared/Gros  | ss Weight        |
| INCLUDE   | E A COPY OF THE CUR  | RENT REGISTRATION             | FOR THE PL       | <u>ATE</u>     |                  |
| REASON FOR REFUND (Check applic   | able box.)   |                               |                  |                |                  |
| Vehicle was: Sold   | Repossessed  | Owner Decease                 | d: Date          |                |                  |
| Vehicle Ownership was Transferr   | red on: Month  | Day                           |                  |                |                  |
| Name of Purchaser/Buyer or Repossessing Lien Claimant: _  |  |                               |                  |                |                  |
| Address   |  | City                          | S                | State          | ZIP              |
| SURRENDER LICENSE PLATE TO CO   | UNTY'S MOTOR VEHICLE   | OFFICE Completed b            | y County Treas   | surer's Motor  | Vehicle Office   |
| The license plate must be surrend   | ered to the county motor ve  | hicle office in the county th | e truck or trail | er was registe | ered.            |
| The license plate listed above has been received by the county:   | ☐ Yes ☐ No   | Initials of Co. Associate     | :                | Date           |                  |
| OWNER'S CERTIFICATION   |  |                               |                  |                |                  |
| I, the undersigned, owner of the all<br>Acknowledgement is made that,<br>registration plate assigned to the r | I have not replaced the  | vehicle referenced herein,    | therefore I m    | nust relinquis | h the vehicle's  |
| I hereby swear and affirm that the statement a misdemeanor and upon   |  |                               |                  | 77 makes swe   | aring to a false |
| Owner's<br>Signature  |  | Hand Printed<br>Name          |                  | Dat            | te               |
| MAILING INSTRUCTIONS  |  |                               |                  |                |                  |
| Mail the completed form and sup   | pporting documents to:   |                               |                  |                |                  |
| Kansas Department of Revenue  | arvicas Email: KT  | OOR VehiclesRefunds@K         | S Gov            |                |                  |

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VCO/TR-86 (Rev. 05/20)

Attn: Vehicle Refunds

Topeka, KS 66601-2505

300 SW 29th Street, P.O. Box 2505