

Request for Tax Refund

Department of Motor Vehicles Agency of Transportation dmv.vermont.gov

120 State Street Montpelier, Vermont 05603-0001 802.828.2000

	Name							Licen	se#				
	Mailing Address												
Address	maining / radii 655												
\ddi													
	City			State Z			ZIP C	ZIP Code					
Name &													
Z													
	Email				Phone								
Cor	nplete the following sec	ction for the veh	icle vou	ı sold									
Coi	Plate #	Model Year	icie you	Make		Date Sold			Sale Price				
	riale #	Woder real		iviane		Date Solu			Odic i nec				
licle	Serial Number (VIN)	•				,			,				
Old Vehicl													
PO													
	Vehicle sold to (name) Vehicle sold to (address)												
Cor	nplete the following se	ction for the veh	icle vou	ı nurchased									
	Plate #	Model Year	1010 , 00	Make	<u>i</u>	Date Purchase	ed		Purchase Pi	rice			
<u>e</u>													
New Vehicle													
>	Serial Number (VIN)												
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	be eligible for a r												
months of the taxable purchase of another vehicle. The registered owner (or co-owner) must													
ap	ppear on both the	old and the n	ew re	gistration.									
Pr	oof of the sale m	ust be includ	led. Fa	ailure to i	nclude p	roof of s	ale wil	l res	sult in a	a den	ial of		
	fund. Example of				-								
	•		•	. ,		J	•	,					
	I certify that the statements herein are true. This declaration is made under the penalties of 23 V.S.A. Section 202, 203 and 32 V.S.A. Section 8910.												
	I certify that the statements he	erein are true. This dec	ciaration is										
re(s)	I certify that the statements he	erein are true. This dec	ciaration is		periation of 20		·						
nature(s)	I certify that the statements he	erein are true. This dec	ciaration is		portained of 20		·						
Signature(s)	I certify that the statements he	erein are true. This dec			periames of 20								
Signature(s)	I certify that the statements he	erein are true. This dec		e of Owner	portanted of 20					Date			

Attn: Accounts Receivable

120 State Street

Montpelier, VT 05603-0001