



STATE OF NEW MEXICO - MOTOR VEHICLE DIVISION  
**REQUEST FOR REFUND**

**CHECK ONE:**

- ☐ Vehicle Related  
☐ Driver Related

**OWNER / DRIVER INFORMATION**

|                         |                                    |                        |
|-------------------------|------------------------------------|------------------------|
| Printed Name            |                                    | Date of Birth          |
| Address                 |                                    | Social Security Number |
| City, State, Zip Code   |                                    | Driver License Number  |
| Telephone No. (       ) | Citation Number<br>(If Applicable) |                        |

**VEHICLE / VESSEL INFORMATION (IF APPLICABLE)**

|                                  |      |                           |                                 |                  |
|----------------------------------|------|---------------------------|---------------------------------|------------------|
| Year                             | Make | Model                     | Body Type (Series)              | State Registered |
| Engine No. (If Applicable)       |      | Vehicle or Hull ID Number | License Plate or Boat No.       |                  |
| MTD Company Name (If Applicable) |      |                           | MTD Account No. (If Applicable) |                  |

**REASON(S) FOR REFUND**

If Vehicle Related, mail to the **VEHICLE SERVICES BUREAU** at the address given above.

- ☐ **INCORRECT COMPUTATION OF REGISTRATION FEE (INCLUDING OVERPAYMENT, DOUBLE PAYMENT OR MISAPPLIED FEES):**  
Submit copy of registration certificate and letter of explanation.
- ☐ **TWO REGISTRATIONS AND VALIDATION STICKERS/DECALS PURCHASED FOR ONE VEHICLE/VESSEL:**  
Submit copy of vehicle/vessel registration certificate being used and the unused registration certificate and sticker/decal.
- ☐ **INCORRECT COMPUTATION OF EXCISE TAX:**  
Submit copy of registration certificate showing fees paid and letter of explanation.
- ☐ **VEHICLE/VESSEL TRANSFERRED FROM ONE PARTY TO ANOTHER OR DISPOSED OF:**  
Indicate exact date vehicle/vessel was transferred or disposed of and method of transfer or disposition. Submit unused registration certificate and sticker/decal.
- ☐ **VETERANS ALLOWANCE:**  
Submit copy (both sides) of New Mexico Veterans Certificate of Eligibility.
- ☐ **EXEMPTION FROM PAYMENT OF NEW MEXICO EXCISE TAX FOR A VESSEL (BOAT).**  
Submit Form 10014, Affidavit of Non-Resident Military Personnel.

If Driver Related, mail to the **DRIVER SERVICES BUREAU** at the address given above.

- ☐ **COURT TICKET - PAYMENT MADE TO MVD INSTEAD OF DESIGNATED COURT.**
- ☐ **DOUBLE PAYMENT**
- ☐ **OVERPAYMENT**
- ☐ **WARNING TICKET**
- ☐ **REINSTATEMENT FEE:**  
Amount Paid \$ \_\_\_\_\_

☐ **OTHER REASON(S) FOR REFUND:** Submit supporting documents and letters of explanation (if needed).

**IMPORTANT!**

**ALL REQUESTS FOR REFUND MUST BE ACCOMPANIED BY A COPY OF EITHER CANCELED CHECK OR MONEY ORDER**

I hereby request refund of fees paid to the New Mexico Motor Vehicle Division for the reason(s) indicated above and certify that all information given is true and correct to the best of my knowledge.

REQUESTOR'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

Please include all copies of payments and mail to:  
(or deliver to any New Mexico Motor Vehicle Field Office)

Motor Vehicle Division  
Drivers Services Bureau  
P.O. Box 1028  
Santa Fe, New Mexico 87504-1028