Form 441021
11-12

IOWA DOT

# CLAIM FOR REFUND ON APPORTIONED VEHICLE

**Disclosure Statement:** The information requested will be used by the Department of Transportation to determine eligibility for a refund. Failure to provide all information will render the claim unprocessible.
**Claim is hereby made for refund of registration fee of $10 or more as provided in Iowa Code Section 321.126 and 321.129 as amended.**

V.I.N. No. _____

Lic. Plate No. _____ _____ Registration Year

Make _____ _____ Model Year

IRP Client ID No. _____

Title No. _____

_____ Name of Carrier/Registrant

_____ Address

_____

_____ Owner Name as shown on the title.

**DEPARTMENT USE ONLY**

Amount of refund $ _____

Date claim received _____

Date plates received _____ ☐ Used ☐ Unused

No. of Unexpired Months _____

Unit No. _____

Supp. No. _____

Iowa Weight _____

Iowa Percentage _____

TIN or SS No. _____

The Undersigned Under Oath Swears Under Penalty of Perjury That Information Furnished In This Application Is True and Correct.

**MUST SIGN HERE OR CLAIM WILL BE RETURNED.**

_____ Claimant Signature

_____ Social Security or Federal Identification Number

_____ Title

_____ Date

Please check the appropriate box and complete the required information or provide required documentation regarding the vehicle you are claiming refund on.

☐ **Vehicle sold or traded to a licensed dealer.** A copy of the bill of sale or title, showing the transfer of ownership must be attached to this claim.

☐ **Vehicle sold to an individual or leased to another carrier.** _____ New License Plate Number and State

_____ Name of New Owner/Carrier

_____ Address of New Owner/Carrier

☐ **AUDIT.** An audit of the carrier's prorate files has revealed an overpayment.

☐ **OVERCHARGE OR ERROR.** Registration fees exceeded the amount required by law or were paid in error. *(Explain in detail on reverse side).*

☐ **VEHICLE HAS BEEN DESTROYED.** By fire, accident or dismantled and its identity as a motor vehicle has been entirely eliminated. Claim must be filed by owner within 30 days after the license plates have been received by the Office of Motor Carrier Services. A copy of the junking certificate or salvage title must be attached with this claim.

☐ **VEHICLE HAS BEEN STOLEN AND NOT RECOVERED.** After December 1st of the year registration fees were paid, the owner shall make a claim and attach a copy of the statement of the theft.

☐ **OTHER.** *Please explain in detail on reverse side.*

**INSTRUCTIONS ON REVERSE SIDE**

## INSTRUCTIONS

A. The registration plates and Claim for Refund must be returned to the Office of Motor Carrier Services, P.O. Box 10382, Des Moines, Iowa 50306-0382, as provided in Section 321.126 or 321.173 or 326.15 of the Code of Iowa.

B. Refunds are calculated on the Iowa fees only on the basis of unexpired months remaining in the registration year for which fees have been paid, AFTER the claim for refund and license plates have been received by the Office of Motor Carrier Services.

C. Other jurisdictions fees are not refundable by Iowa. We will make the initial refund request to each jurisdiction on your behalf, from there, each jurisdiction will contact you directly, with any additional information, requirements or forms they may need. Each jurisdiction has their own refund policy according to their individual state statute.

D. Refund of registration fees do not apply to trailers, unless the refund is based on payment of an erroneous fee, an error in registration, or unused registration years on a multiyear plate.

E. No refund will be paid if under $10.

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Use this space to list additional information which cannot be completed on the reverse side of this form.