



Carole Jean Jordan, C.F.C.

TAX COLLECTOR FOR INDIAN RIVER COUNTY

Surrender License Plate

Date: _____

License Plate #: _____ Decal Number: _____ Expiration: _____

Last Assigned to Vehicle Identification Number: _____

Year: _____ Make: _____

Owner(s) Name(s): _____

Daytime Telephone number: _____

Email Address: _____

Surrendered by: _____

Surrendering individuals driver license number: _____

I hereby certify that I wish to surrender the license plate referenced above. If the most current decal is not attached to the plate, I certify that it is lost, destroyed or stolen and is not in my possession. If the decal is found, it will be destroyed and not be affixed to any motor vehicle.

Under penalties of perjury, I declare that I have read the foregoing document and the facts stated in it are true.

Signature: _____

Printed Name: _____

1800 27th Street, Bldg. B, Vero Beach, FL 32960-0310

Website: www.IRCTax.com

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