



TECHNICAL ADVISORY

DIVISION OF MOTORIST SERVICES

DATE: February 09, 2015	Technical Advisory RS/TL15-002
SUBJECT: Presale Specialty License Plate Voucher Program	

Overview:

Recently the Department was notified by a specialty license plate program representative that most of the various tax collector offices they visited were unaware that their license plate was in the presale voucher program. This is a reminder of that program and which license plates are involved.

Details:

Several specialty license plates are in the presale voucher process. All presale license plates have 24 months after the presale specialty license plate voucher is established to record a minimum of 1,000 voucher sales with the Department. The license plates will not be available for manufacture until this minimum requirement has been met. Below is a list of the license plates involved and the 24-month ending date of their presale process.

- American Legion (06/30/2015)
- Big Brothers Big Sisters (06/30/2015)
- Fallen Law Enforcement Officers (09/30/2016)
- Florida Sheriffs Association (09/30/2016)
- Moffitt Cancer Center (09/30/2016)
- Hispanic Achievers (06/30/2016)
- St. Johns River (06/30/2016)

When a customer requests one of the above license plates, please explain that the plates are not available yet; however, they can purchase a voucher to help increase the organization’s minimum presale requirements.

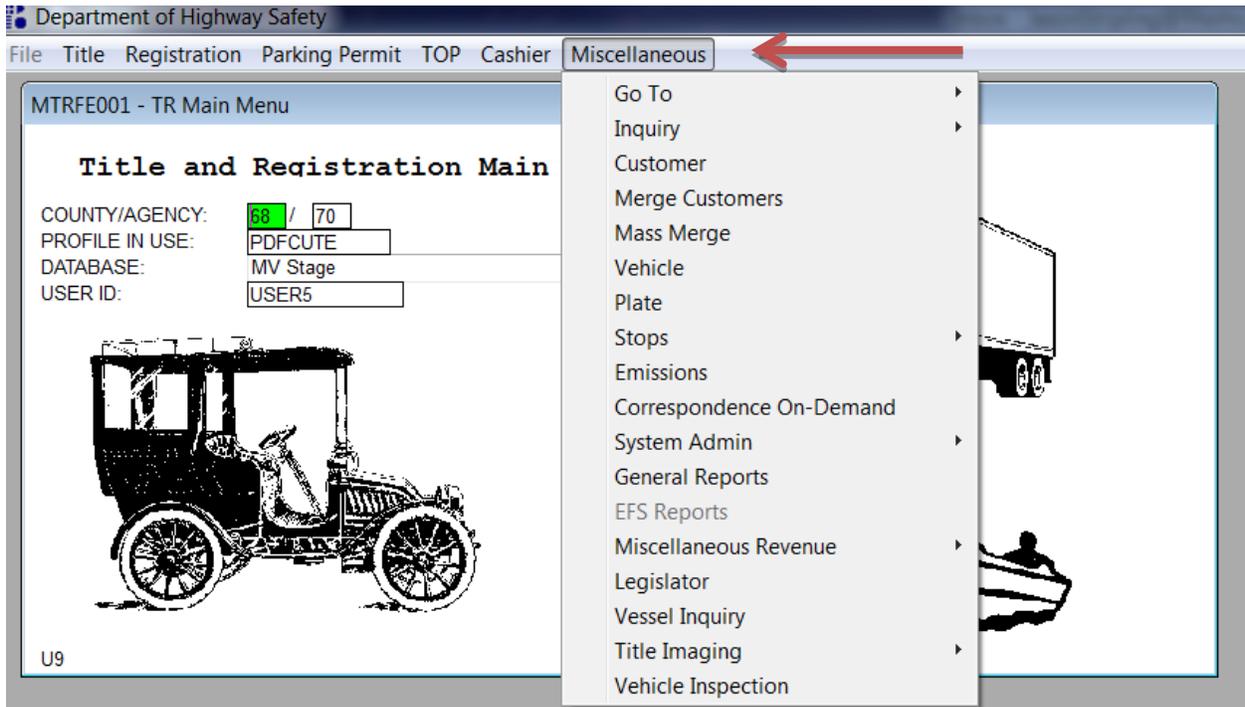
For additional information regarding the presale license plate voucher program, see DMS procedure RS-67 at the following link <http://www3.flhsmv.gov/dmv/Proc/RS/RS-67.pdf>.

Conclusion:

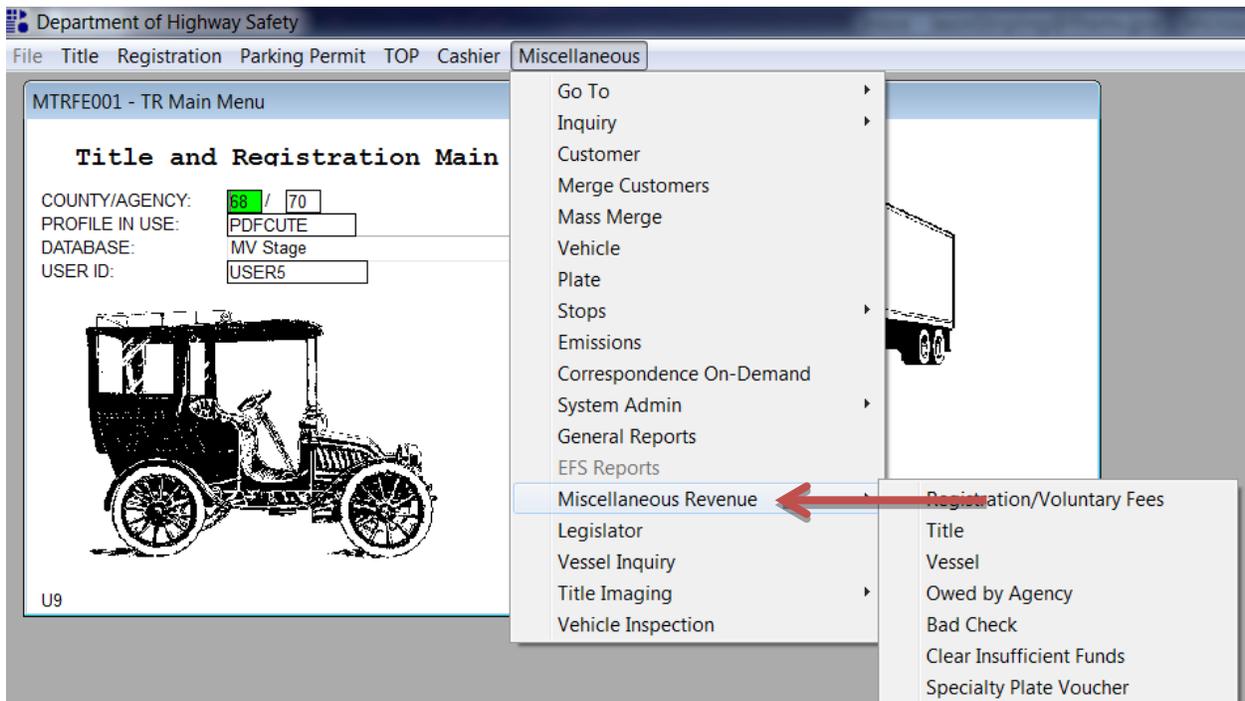
This information will allow the tax collector offices and tag agencies to have a better understanding of the voucher process and assist organizations as they sell the vouchers that will allow their license plates to be available to the public. If you have any questions or need additional information, contact the Field Support Center.

See the following screenshots to process the transaction in FRVIS.

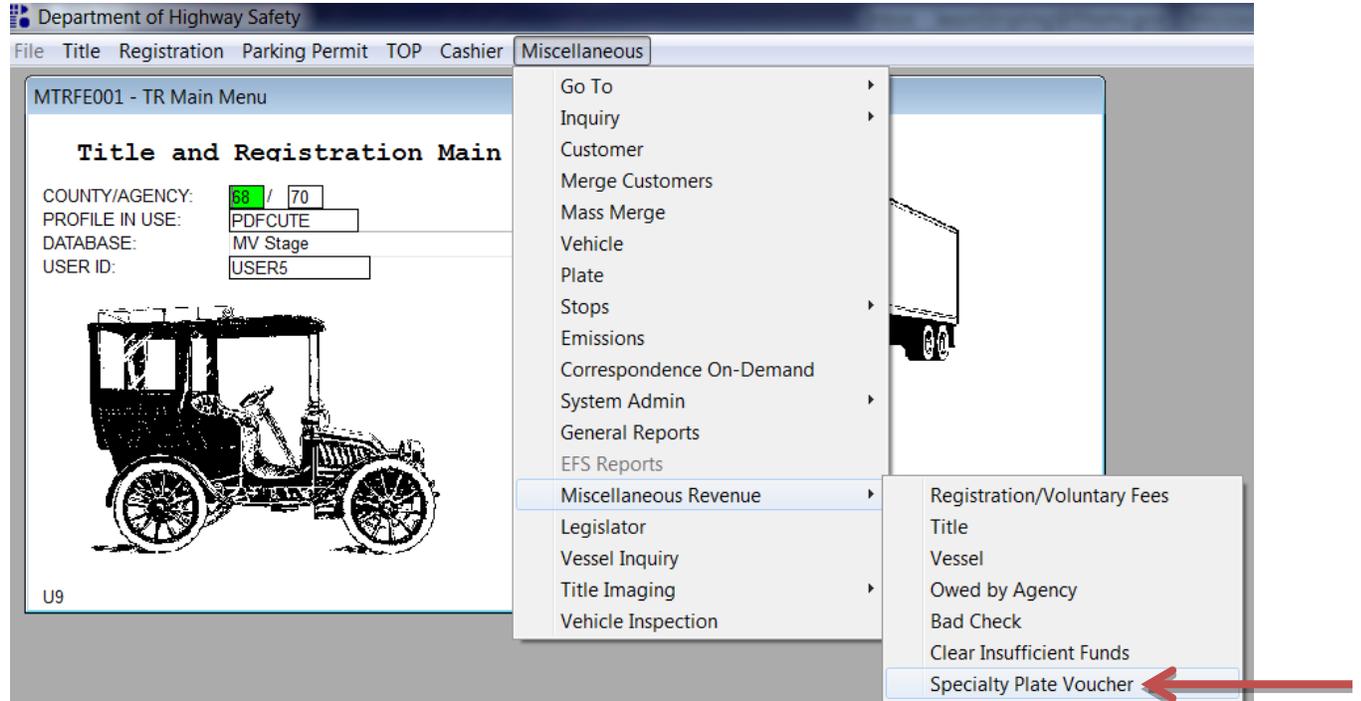
Select Miscellaneous



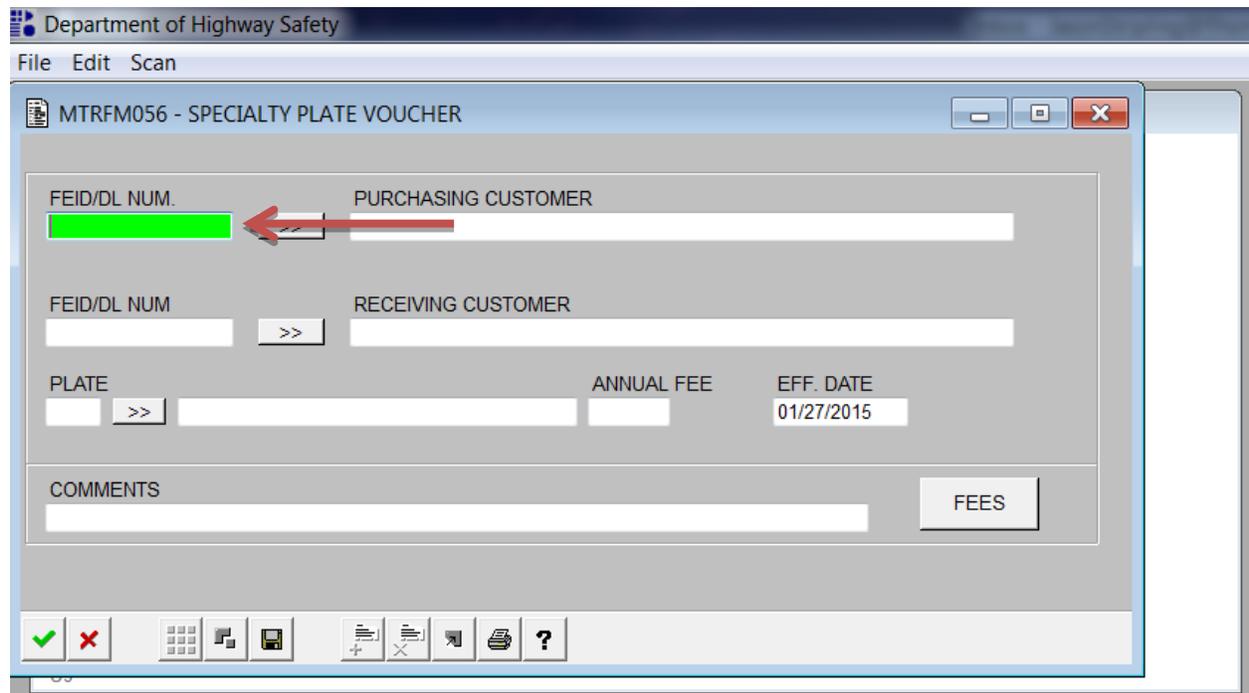
Select Miscellaneous Revenue



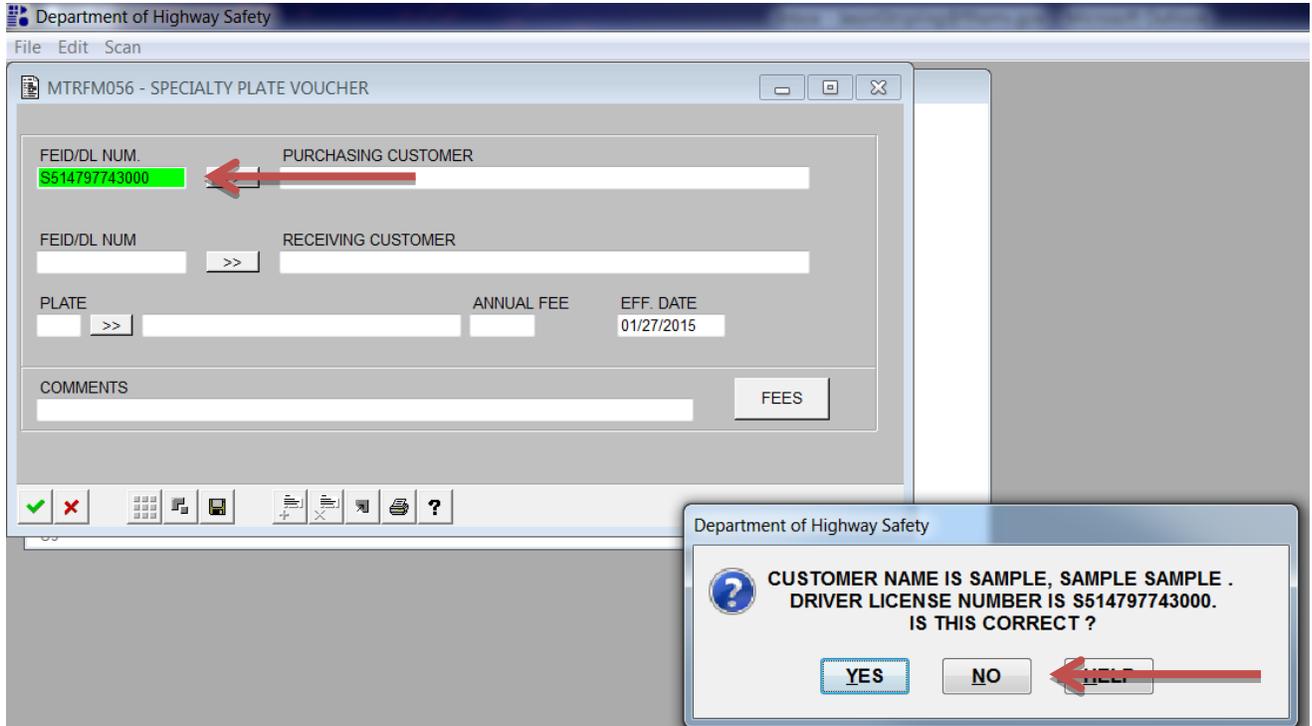
Select Specialty Plate Voucher



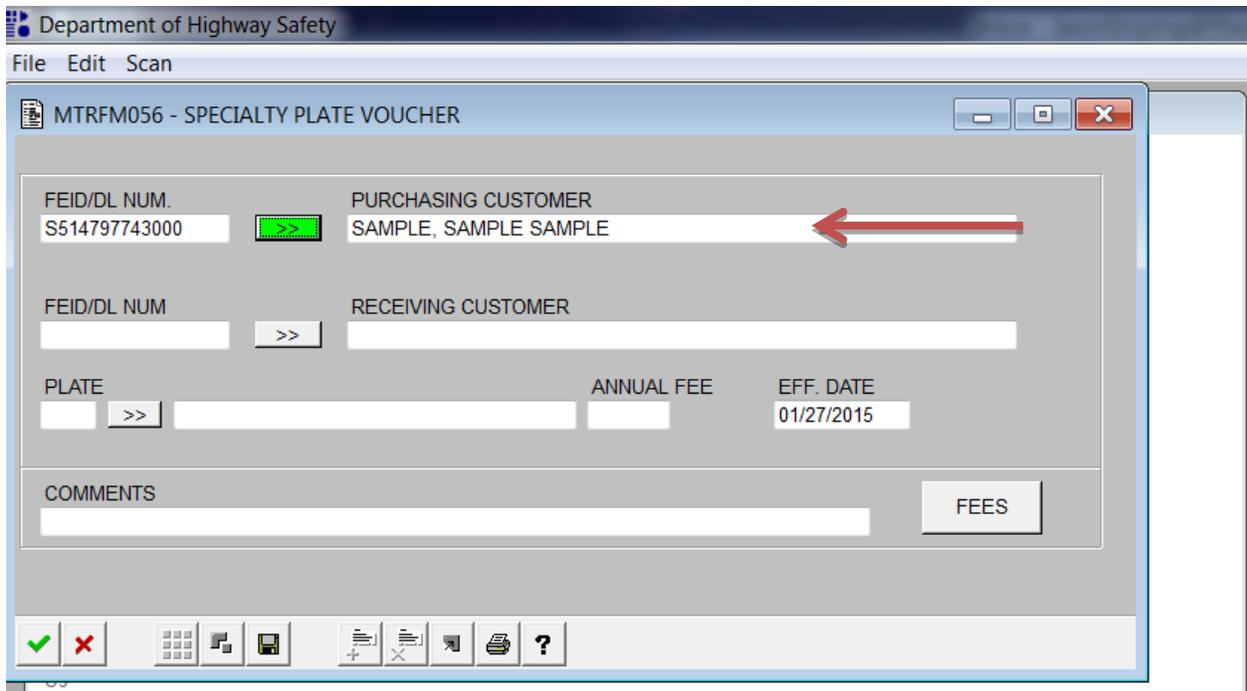
Enter FEID or Driver License Number



Number entered – Respond to Question



Screen after response to question



Enter FEID or Driver License Number - Respond to Question

Department of Highway Safety

File Edit Scan

MTRFM056 - SPECIALTY PLATE VOUCHER

FEID/DL NUM. S514797743000	>>	PURCHASING CUSTOMER SAMPLE, SAMPLE SAMPLE
FEID/DL NUM. S514797743000	<<	RECEIVING CUSTOMER SAMPLE, SAMPLE SAMPLE
PLATE >>	ANNUAL FEE	EFF. DATE 01/27/2015
COMMENTS	FEES	

Department of Highway Safety

? CUSTOMER NAME IS SAMPLE, SAMPLE SAMPLE .
DRIVER LICENSE NUMBER IS S514797743000.
IS THIS CORRECT ?

YES NO ~~HELP~~

After selection and response to question

Department of Highway Safety

File Edit Scan

MTRFM056 - SPECIALTY PLATE VOUCHER

FEID/DL NUM. S514797743000	>>	PURCHASING CUSTOMER SAMPLE, SAMPLE SAMPLE
FEID/DL NUM. S514797743000	>>	RECEIVING CUSTOMER SAMPLE, SAMPLE SAMPLE
PLATE >>	ANNUAL FEE	EFF. DATE 01/27/2015
COMMENTS	FEES	

Enter Inventory Code

Department of Highway Safety

File Edit Scan

MTRFM056 - SPECIALTY PLATE VOUCHER

FEID/DL NUM. S514797743000	>>	PURCHASING CUSTOMER SAMPLE, SAMPLE SAMPLE	
FEID/DL NUM. S514797743000	>>	RECEIVING CUSTOMER SAMPLE, SAMPLE SAMPLE	
PLATE HVR	>>	ANNUAL FEE	EFF. DATE 01/27/2015

COMMENTS

FEES

✓ ✗ [Grid] [Print] [Save] [List] [Close] [Print] [Help]

Answer OK

Department of Highway Safety

File Edit Scan

MTRFM056 - SPECIALTY PLATE VOUCHER

FEID/DL NUM. S514797743000	>>	PURCHASING CUSTOMER SAMPLE, SAMPLE SAMPLE	
FEID/DL NUM. S514797743000	>>	RECEIVING CUSTOMER SAMPLE, SAMPLE SAMPLE	
PLATE HVR	>>	ANNUAL FEE	EFF. DATE 01/27/2015

COMMENTS

FEES

✓ ✗ [Grid] [Print] [Save] [List] [Close] [Print] [Help]

Department of Highway Safety

THIS PLATE IS AUTHORIZED FOR PRE-SALES ONLY.

OK HELP

Completed Screen

Department of Highway Safety

File Edit Scan

MTRFM056 - SPECIALTY PLATE VOUCHER

FEID/DL NUM.	PURCHASING CUSTOMER
S514797743000 >>	SAMPLE, SAMPLE SAMPLE

FEID/DL NUM.	RECEIVING CUSTOMER
S514797743000 >>	SAMPLE, SAMPLE SAMPLE

PLATE	ANNUAL FEE	EFF. DATE
HVR >> HISPANIC ACHIEVERS	25.00	01/27/2015

COMMENTS	FEES
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Tab to fees

Department of Highway Safety

File Edit Scan

MTRFM056 - SPECIALTY PLATE VOUCHER

FEID/DL NUM.	PURCHASING CUSTOMER
S514797743000 >>	SAMPLE, SAMPLE SAMPLE

FEID/DL NUM.	RECEIVING CUSTOMER
S514797743000 >>	SAMPLE, SAMPLE SAMPLE

PLATE	ANNUAL FEE	EFF. DATE
HVR >> HISPANIC ACHIEVERS	25.00	01/27/2015

COMMENTS	FEES
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View of plate image for voucher. If correct, exit screen

PRE-SALES SPECIALTY PLATE VOUCHER



ISSUED DATE: January 27, 2015

ISSUED FOR: SAMPLE, SAMPLE SAMPLE CUSTOMER #:223808842

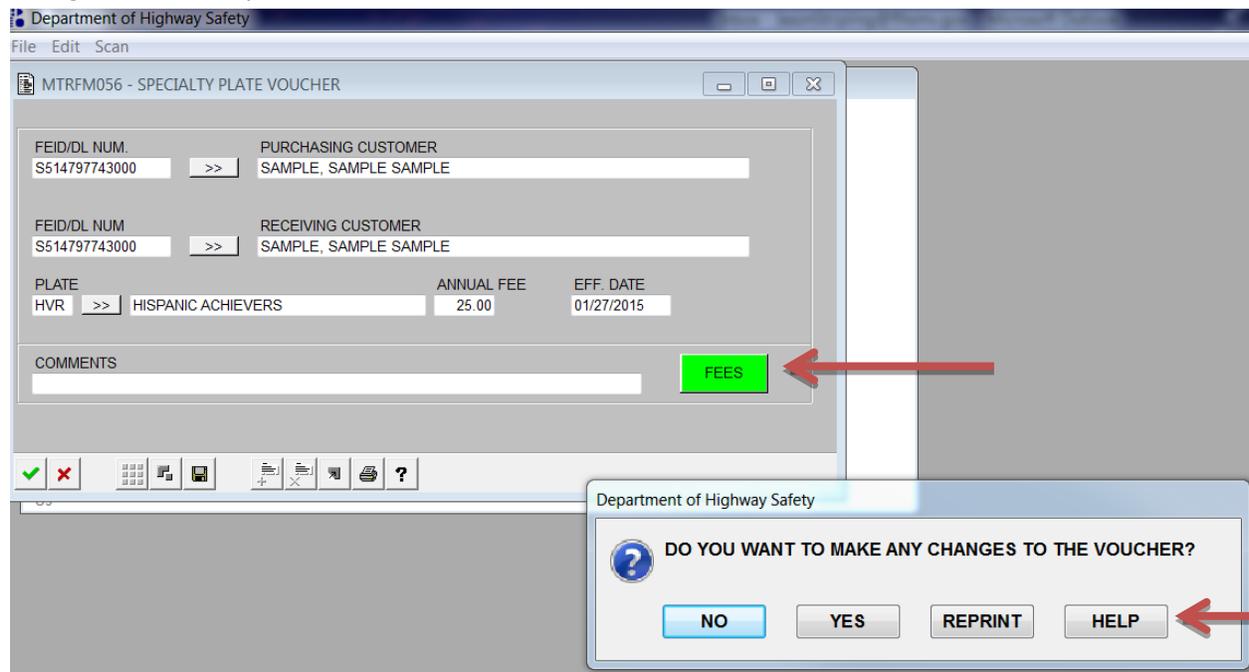
Once the pre-sales requirements have been met, this voucher exempts SAMPLE, SAMPLE SAMPLE from one payment of the specialty fees associated with the issuance of a HISPANIC ACHIEVERS specialty license plate. Until that time, this voucher cannot be used or refunded.

The total value of the voucher is \$ 30.00.
This voucher cannot be transferred or replaced.

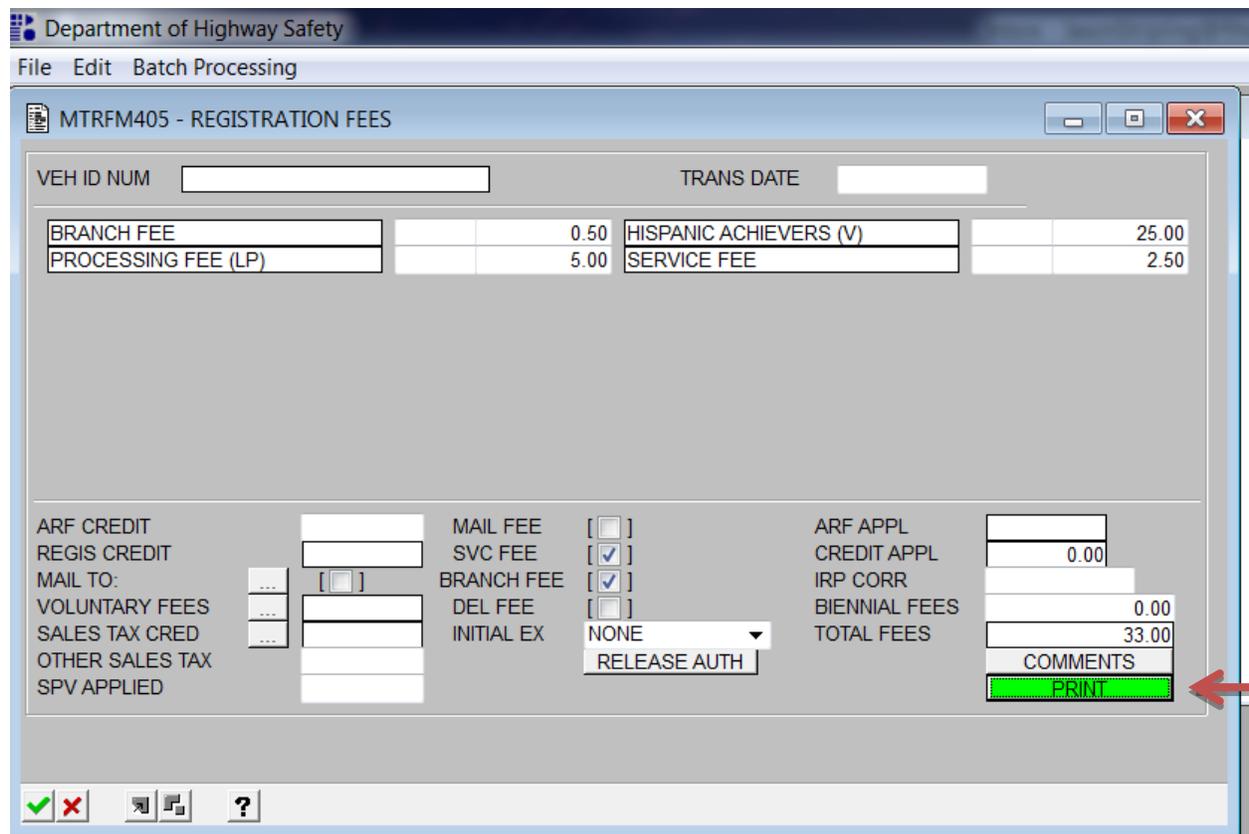
Only in the event that the pre-sales requirements for this specialty license plate are not met within the allotted time period may this voucher be refunded or exchanged for a different specialty license plate.

To view the progress of the pre-sales for this license plate, please log into www.flhsmv.gov and look under On Line Services.

FRVIS returns after you exit from above screen. Respond to question, if no tab to fees. If yes, make changes and follow process.



Tab to print button



Follow batch instructions to complete the transaction.

Specialty License Plate Voucher (HSMV 82041) will print; this will be given to the customer.

CNTY#	AGY#	SUB#	RPT#	  SPECIALTY PLATE VOUCHER RECEIPT	TRANSACTION ID'S		
68	70	FIV	3702		L#	95547	
AUDIT #					T#	526422758	
					B#	85059	

TITLE NUMBER	VEHICLE/VESSEL IDENTIFICATION #	YR. MAKE	MAKE or MANUFACTURER	BODY TYPE	VEHICLE COLOR	WT/LENGTH	GVW/LOC	
DATE OF ISSUE MO. DAY YEAR	TRANS CODE	VEHICLE USE	HULL MATERIAL	PROPULSION	FUEL	VESSEL TYPE	WATER	
01 28 15								
Applicant/Owner's Name & Address SAMPLE SAMPLE SAMPLE 123 1ST ST TALLAHASSEE, FL. 32311					BIRTHDATE SEX MO. DAY YEAR		RESIDENT Y N ALIEN	CNTY RES #
					M 08 20 74		X	13
					1st OWNER FL/DL# OR F.E.I.D.#		2nd OWNER FL/DL# OR UNIT #	
					S514797743000			
VOLUNTARY CONTRIBUTIONS								
AGENCY FEE		REG FEE	DONATION	GRAND TOTAL				
3.00		5.00	25.00	33.00				

Action Requested: SPECIALTY PLATE VOUCHER RECEIPT **Brands:**

PREV. STATE	DATE ACQUIRED	NEW	USED	ODOMETER / VESSEL MANUFACTURER	<input checked="" type="checkbox"/>	ODOMETER DECLARATION CERTIFICATION
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LIEN INFORMATION	DATE OF LIEN	RECEIVED DATE	FEID # OR FL / DL AND SEX AND DATE OF BIRTH	DMV ACCOUNT #
NAME OF FIRST LIENHOLDER:				
ADDRESS			SALVAGE TYPE	
SELLER INFORMATION				
NAME OF SELLER, FLORIDA DEALER, OR OTHER PREVIOUS OWNER				
ADDRESS				
DEALER LICENSE NO.				
CONSUMER OR SALES TAX EXEMPTION #				

SALES TAX AND USE REPORT TRANSFER OF TITLE <input type="checkbox"/> PURCHASER HOLDS VALID IS EXEMPT FROM EXEMPTION CERTIFICATE FLORIDA SALES OR <input type="checkbox"/> VEHICLE / VESSEL WILL BE USE TAX FOR THE USED EXCLUSIVELY FOR RENTAL REASON(S) CHECKED <input type="checkbox"/> OTHER	INDICATE TOTAL PURCHASE PRICE, INCLUDING ANY UNPAID BALANCE DUE SELLER, BANK OR OTHERS \$ 0.00 INDICATE SALES OR USE TAX DUE AS PROVIDED BY CHAPTER 212, FLORIDA STATUTES \$ 25.00 <input type="checkbox"/> SELLING PRICE VERIFIED
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APPLICANT CERTIFICATION

I WE HEREBY CERTIFY THAT THE VEHICLE/VESSEL TO BE TITLED WILL NOT BE OPERATED UPON THE PUBLIC HIGHWAYS/WATERWAYS OF THIS STATE.

I CERTIFY THAT THE CERTIFICATE OF TITLE IS LOST OR DESTROYED.

I CERTIFY THAT THIS MOTOR VEHICLE/VESSEL WAS REPOSSESSED UPON DEFAULT OF THE LIEN INSTRUMENT AND IS NOW IN MY POSSESSION.

I WE HEREBY CERTIFY THAT I WE LAWFULLY OWN THE ABOVE DESCRIBED VEHICLE/VESSEL, AND MAKE APPLICATION FOR TITLE. IF LIEN IS BEING RECORDED NOTICE IS HEREBY GIVEN THAT THERE IS AN EXISTING WRITTEN LIEN INSTRUMENT INVOLVING THE VEHICLE/VESSEL DESCRIBED ABOVE AND HELD BY LIENHOLDER SHOWN ABOVE. I WE FURTHER AGREE TO DEFEND THE TITLE AGAINST ALL CLAIMS.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING DOCUMENT AND THAT THE FACTS STATED IN IT ARE TRUE.

_____ Signature of Applicant/Owner _____ Signature of Applicant/Co-Owner

HSMV 82041 REVISED 02/06 TEST DOCUMENT

I UNDERSTAND THAT MY DRIVER LICENSE AND REGISTRATIONS WILL BE SUSPENDED IMMEDIATELY IF THE INSURER DENIES THE INSURANCE INFORMATION SUBMITTED FOR THIS REGISTRATION.