

Request for Proof of Vehicles Owned

Date

Mail To: Division of Motorist Services
2900 Apalachee Parkway
Room B231, Mail Stop 91
Neil Kirkman Building
Tallahassee, Florida 32399

Re: Request for Proof of Vehicles Owned

To Whom It May Concern:

I am requesting a letter of verification from the Division of Motorist Services to serve as proof that I do not own vehicles in the State of Florida. My personal information and mailing address is as follows:

Requestor's Full Legal Name

Requestor's Mailing Street Address

Requestor's Florida Driver License Number

Mailing City State Zip Code

I am requesting this information due to the following (check one):

CHECK ONE	<input type="checkbox"/> Probation
	<input type="checkbox"/> Financial Assistance
	<input type="checkbox"/> Other: <input type="text"/>
	<input type="text"/>

Thank you for your assistance with this matter.

Sincerely,

Requestor's Signature

