Claim for a Driver's License Fee Refund

Print this completed form. This form can be mailed or submitted in person to Driver and Vehicle Services, 445 Minnesota Street, St. Paul, Minnesota 55101-5162. It may also be faxed to (651) 296-2787.

- If you have questions or need additional information, please contact DVS at (651) 297-3298 or (651) 282-6555 (TTY).
- Where applicable, please submit copies of receipts as proof of payment.

A General Information (PLEASE PRINT)

Name (LAST, FIRST, MIDDLE INITIAL) ________________________

Date of Birth (mm/dd/yy) ________________

DL Number (OMIT DASHES) ________________________

Street Address

City / State / Zip Code ________________________

County ________________________

B Type of Refund

☐ Reinstatement Fees ☐ Motorcycle Fees

☐ Driver's License Fees ☐ Instruction Permit Fees

☐ Identification Card Fees ☐ Other Fee ________________________

Please explain the reason for your request:

___________________________________________________________________________

Signature of Applicant ________________________

Date (mm/dd/yy) ________________________

OFFICE USE ONLY

Date Approved ________________________

Amount Approved ________________________

Approved By ________________________