



FloridaVehicleRegistrationService.com

another Full Featured Service Provided by

Fast Forward Systems

414 NW Knights Ave Lake City, FL 32055-7247

Phone 407 701 7002

E-Mail mail@floridavehicleregistrationservice.com

RENEWING YOUR FLORIDA VEHICLE REGISTRATION

Use this package when you have a previously issued Florida vehicle registration and wish to have it renewed whether you are currently in Florida or Out of State. Enter requested information and return these pages to us via USPS at the above address or via email.

Telephone number where you may be reached _____

Your Email address _____

Mail completed work to _____

CITY _____ **STATE** _____ **ZIP** _____

ITEM ONE - COPY OF DRIVER LICENSE OF OWNER

You do NOT need to have a FL driver license in order to register a vehicle in Florida. However, if you do not hold a Florida driver license, you may be required to prove property ownership or mail receipt at your address in Florida.

If your License is not valid and current, you will need to make it valid and current.

Owner Name as it appears on Driver License _____

Driver License Number _____ State _____ DOB _____

Your Florida address _____

CITY _____ STATE _____ ZIP _____

IF YOU DO NOT HAVE A FLORIDA ADDRESS WHERE YOU MAY RELIABLY RECEIVE MAIL 365 DAYS PER YEAR, PLEASE COMPLETE AND INCLUDE THE STREET ADDRESS IN FLORIDA WORKSHEET IN ORDER TO ATTAIN ONE.

ITEM TWO – COPY OF FLORIDA INSURANCE CARD OR INSURANCE RIDER WITH DECLARATIONS PAGE

If the proof is a card, it should say FLORIDA AUTO INSURANCE CARD on the face of the card. If you use a insurance rider with declarations page, be sure the document shows insurance as paid and has NO REFERENCE to any address which you may have which is outside of Florida

Enter the insurance information for your vehicle here.

INSURANCE INFORMATION

Policy Number _____ Effective Date _____

Insurance Carrier _____ Telephone _____

ITEM THREE – COPY OF YOUR FLORIDA VEHICLE REGISTRATION

If vehicle is less than 7500lb GVW then registration will be until individual owner's next birthday.

If corporate owned or over 7500lb, then registration will run to end of current registration for this class of vehicle either June or December.

Provide a copy of your FL registration, a photo of your plate, or information which to the best of your knowledge could be used to find your registration in the State of Florida vehicle registration database.

Plate Number _____ Last registration expires on DATE _____

on a Year _____ Make _____ Model _____

Vehicle was registered in your name at this Address _____

CONTINUED ON PAGE 2

RENEWING YOUR FLORIDA VEHICLE REGISTRATION Page 2

ITEM FOUR –TRANSACTION COST WORKSHEET AND REMITTAL ADVICE

Since we cannot accurately predict the total cost that the State of Florida will charge for any transaction, all transactions require a credit or debit card on file in order to charge for any overages in the state fees, or credit for any remaining balance in case our quoted or advertised price results in remainder funds.

Enter your selection for services to be provided.

SERVICE FEES (Enter amount for Selected Service) \$39.00 EACH VEHICLE Registration Service Fee \$ _____

Prepay for an additional year of Vehicle Registration \$39.00 EACH VEHICLE Registration Service Fee \$ _____

STATE FEES FOR TITLING AND REGISTRATION

(Leave this amount blank and we will enter actual fees charged by the State of Florida for this transaction.)

If paying with credit card, check or money order enter 95.00 for each annual renewal desired. State fees \$ _____

HANDLING FEES

Standard Handling provides for all work to be completed as soon as time allows and final work product returned to you via first class mail.

Priority handling puts your work order on top of the queue and allows the final work product to be returned to you via email or USPS Priority Mail.

Express handling puts your work order on top of the queue and allows the final work product to be returned to you via email or USPS Express Mail.

IF YOU ARE OUTSIDE THE US, EXPRESS HANDLING WILL APPLY AND YOUR REGISTRATION WILL BE SENT INTERNATIONAL FIRST CLASS

IF YOU WISH US TO USE UPS OR FEDERAL EXPRESS TO RETURN THE TITLE TO YOU, PLEASE SELECT STANDARD HANDLING AND INCLUDE A SELF ADDRESSED PREPAID ENVELOPE FROM THE CARRIER OF YOUR CHOICE.

If Standard Handling then enter zero. PRIORITY HANDLING Enter \$14.00 EXPRESS HANDLING Enter \$33.00 \$ _____

TOTAL DUE –

(Orders paid by other than Cash, Check or Money order will be charged 4% more than this amount) \$ _____

If Paying by Check or Money Order, make payable to:

Fast Forward
414 NW Knights Ave
Lake City, FL 32055-7247

ACKNOWLEDEMENTS

Read and sign.

I hereby appoint Fast Forward Systems as my agent to take whatever actions are necessary to renew my Florida Vehicle Registration and agree to release and hold harmless its agents, directors, shareholders, employees, legal representatives, successors, or assigns from any liability which may arise from these actions. I have researched and fully understand the laws that are applicable to my situation and agree to pay all taxes that may be due any taxing authority as a result of these actions. I understand that all funds presented to Fast Forward are considered as deposits for work in progress, subject to bank fund clearance, and are fully refundable in the event the transaction is cancelled by Fast Forward Systems. In the event that I, or the State of Florida, cancel(s) this transaction prior to completion, I agree that Fast Forward Systems may retain their service fees and refund only the State portion of this transaction to me. By entering credit card information below, I certify that I am an authorized signer on the account and hereby give my permission to bill the credit card as required for all costs associated with this transaction including, but not limited to taxes, fees, handling fees, bank fees, transaction costs, delivery costs and collection costs; or to credit the card for any unused deposit monies regardless of how originally remitted.

TYPE OF CARD (Circle One) MASTERCARD VISA DISCOVER AMERICAN EXPRESS

NAME ON CARD _____

BILLING ADDRESS _____

CITY _____ STATE _____ ZIP _____

CARD NUMBER _____ EXP _____ 3 digit code _____

SIGNATURE _____ **DATE** _____

STREET ADDRESS IN FLORIDA WORKSHEET

Please Print Legibly and return to us along with your USPS 1583 form
Full instructions may be found at www.fastforwardremail.com

MEMBERSHIP MENU

Select your membership choice and enter the desired term cost on payment remittal form.
If the type of membership you desire is not listed here, please contact our office for customized service.

Address services require postage deposit account for mail forwarding service.

_____ **Standard Membership Address Service** \$499.00
Address Service for 36 months from the end of last month

_____ **Annual Membership Address Service** \$199.00
Address Service for 12 months from the end of last month

OTHER SERVICES

_____ When my vehicle registration arrives, renew it for me and bill my postage account for 25.00 plus the State fees.

_____ AUTOMATICALLY REFILL my postage deposit account as needed until I tell you differently using my credit card.

_____ AUTOMATICALLY RENEW my address service membership as needed until I tell you differently using my credit card.

IN CASE OF EMERGENCY CONTACT: _____

CITY _____ STATE/ZIP _____

PAYMENT REMITTAL FORM

PLEASE ENTER THE APPROPRIATE AMOUNTS FROM THE MEMBERSHIP MENU.

MEMBERSHIP DUES from Membership Menu \$ _____

ASSOCIATE MEMBER(S) # _____ **TIMES \$30.00 =** \$ _____

POSTAGE DEPOSIT \$ _____ 50.00

(Memberships require postage on deposit for remail service)

TOTAL ENCLOSED \$ _____

Affirmations – Signature by primary member binds all parties receiving mail at Fast Forward.

I hereby confirm that I have researched, read, understand and agree to abide by the terms and conditions regarding the use of Fast Forward Address Service with mail forwarding which is found on the website www.fastforwardremail.com and I request that my Fast Forward membership privileges begin forthwith.

SIGNATURE _____ **DATE** _____

Please make Check or Money Order payable to: Fast Forward
414 NW Knights Ave
Lake City, FL 32055

YOU MAY ALSO REMIT VIA PAYPAL, SEND PAYMENT TO
PAYMENTS@FASTFORWARDREMAIL.COM

FAST FORWARD...

-----Your Mail Follows You.....ANYWHERE-----