**REGISTRATION CARD REQUEST FORM (FOR ROAD TAX RENEWAL)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Dealer** |  | | | | |
| **I would like to:**  **(Please tick)** | 🞎 Collect the registration card Date of collection:  🞎 FCC to renew road tax for the vehicle Any other remarks: | | | | |
| **Date of Request/**  **Contact person** |  | | | | |
|  | ***For FCC Use Only***  *Date processed/returned:*  *Processed by:* | | | | |
| **Vehicle No./Last payment date** | **OK** | **NOT OK** | **Payment Amt** | **Renew**  **date** | **Remarks** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Total Amt to be paid |  | | | | |
| Collect date:  Signature: | | | | | |

|  |
| --- |
| **Please note to in order to ensure a smooth collection:**   * Please ensure that upon renewal of insurance, the amount insured is the amount reflected on this form * Please fax a collection slip for road tax renewal together with deposit slip and indicate “ROAD TAX RENEWAL” on collection slip * **For collection at the counter:** If the customer has amount outstanding, ***please present the payment with a FCC collection slip together with this slip at the point of retrieving the registration card from FCC***; the registration card will not be released otherwise * **For FCC renewal:** If the customer has amount outstanding, please deposit the payment into FCC’s account as soon as possible and **fax the deposit slip together with this form** (Attention to collections) |