



BRITS - VOID REQUEST FORM

Order Number: _____

Order Date: _____

User ID: _____

Phone #: (____) _____

Office/Location Name: _____

Void Authorization Code #: _____

<i>Post Process Date Void</i>
(HQ Staff Only) Date Voided: _____
(HQ Staff Signature) Voided By: _____

Select the Reason for the Void:

- | | |
|---------------------------------------------------------------------|-----------------------------------------------------------------------------|
| <input type="checkbox"/> Wrong vessel/motor/dealer processed | <input type="checkbox"/> Incorrect vessel length affecting registration fee |
| <input type="checkbox"/> Wrong sales date entered | <input type="checkbox"/> Misunderstood transaction request |
| <input type="checkbox"/> Wrong sales price entered | <input type="checkbox"/> Customer withdrew request |
| <input type="checkbox"/> Wrong trade-in amount entered/not credited | <input type="checkbox"/> Other, explain _____ |

Comments: _____

List transaction(s) to be voided and complete all data fields (attach additional sheets if needed):

Check One	TX or PBO Number	Transaction Description	Document Description	Returned	Not Applicable	Not Yet Fulfilled	Lost Destroyed
<input type="checkbox"/> B <input type="checkbox"/> M			Title	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PB Operator			ID Card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dealer			Decal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> B <input type="checkbox"/> M			Title	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PB Operator			ID Card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dealer			Decal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> B <input type="checkbox"/> M			Title	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> PB Operator			ID Card	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dealer			Decal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is there a follow-up/correcting transaction? Select only one.

- Already processed - Enter follow-up/correcting transaction number. _____
- None required
- Action required - explain what action is required: _____
- _____

Is there a refund due?

- No, the void has been completed.
- No, the credit should be used to process a follow-up/correcting transaction.
- Yes, refund the owner of record.
- Yes, refund the remitter, not the owner of record.
- Explanation required by Office: _____
- Name: _____ Address: _____
- City, State, Zip: _____
- Yes, refund TAC Office.

I hereby certify that all statements in this document are true and correct to the best of my knowledge and belief.

Processor's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____