

# Sub

Maine Revenue Services  
Political Subdivision  
Fuel Tax Refund Application



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EIN

Period Begin

Period End

1. Entity Information (taxpayer business name and address)

2.  **OUT OF BUSINESS?** Date closed:

3.  **OWNERSHIP OR NAME CHANGE?** Date

Explanation

4.  **SOLD?** Date

**Do Not Use Red Ink!**

ADDRESS CHANGE? Make corrections above and check here

**Claim Information**

Requests for a refund must be filed within 12 months of the date of purchase of the fuel.

Refund Claim (from reverse side)	Gasoline	Diesel	Propane
Refund Claim from line 13 on back of form	1a. <input type="text"/>	1b. <input type="text"/>	1c. <input type="text"/>
Sub Totals	2a. <input type="text"/>	2b. <input type="text"/>	2c. <input type="text"/>
Total Tax Refund	(Total together the amounts on line 2 for each product)		3. <input type="text"/>

**Certification/Waiver**

I, the undersigned, state that the information on this application is true, correct and complete to the best of my knowledge.

Signature/Title

Print Name

Date

Phone #

Requests for a refund must be made within 12 months of the date of purchase of the fuel.  
 (Do **NOT** include dyed diesel)

	Month	Year	Gasoline	Diesel	Propane
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
<b>Total Gallons</b>					
<b>Refundable Rate</b>			<b>x .300</b>	<b>x .312</b>	<b>x .219</b>
13. <b>Refund Claim</b>			a. <input type="text"/>	b. <input type="text"/>	c. <input type="text"/>

Enter refund claim on line 1 on front

Mail to: Maine Revenue Services, Sales, Fuel & Special Tax Division, PO Box 1064, Augusta, ME 04332-1064. Questions? Call 624-9693.