

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.

1b.

1c.

Sub Totals

2a.

2b.

2c.

Total Tax Refund

(Total together the amounts on line 2 for each product)

3.

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.					
Total Gallons					
Refundable Rate			x .300	x .312	x. 219
13. Refund Claim	a.		b.		c.

Enter refund claim on line 1 on front

ATTENTION - Please include with this application:

- Copies of receipt(s), invoice(s), or supplier statement(s) to support the purchases of fuel claimed on the application included excise tax. If a supplier statement is provided, it must include:
 - Supplier Name
 - Supplier Address
 - Purchasers Name
 - Date of Sale
 - Type of fuel
 - Number of gallons sold
 - Price per gallon
 - ***state/federal tax broken out or clear statement that says state/federal tax included
 - Total amount
 - If in letter format – signed by distributor/supplier

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

Email: Salesapp.MRS@maine.gov