

FORM AU-725b
Motor Vehicle Fuels Tax Refund Claim
DIESEL-FARM USE ONLY

INSTRUCTIONS

(Rev. 11/00)

1. For additional instructions and information see reverse side.
2. Mail original to the Department of Revenue Services at the above address.
3. **REFUND CLAIMS MUST BE FILED BY MAY 31, 2001**, for diesel fuel used during calendar year 2000.

CT Tax Registration Number / Social Security Number		Telephone Number ()		FOR DEPARTMENT USE ONLY		Audit Number	
Name of Claimant (Type or print)				Claim Number			
Number and Street				Refund Gallons			
City or Town		State	ZIP+4	Refund Tax \$			
Type of Business		Location of Records (if different from above)		Reviewed By		Date	
Prior Claim Filed for Period Ending / /		Period of Claim From To		Approved By		Date	
No. of Storage Tanks	Meters <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Capacity of Storage Tanks	Acres Under Cultivation		Type of Farming		

Date	Purchased From	Number of Diesel Gallons	Taxable Use	Non-taxable Use
	Beginning Inventory			
	Ending Inventory			
Total Use				

Computation of Claim
 Multiply total non-taxable use by .18 per gallon \$ _____

List and Identify All Commercial Registered Vehicles Owned or Operated (No refund for diesel fuel used in these vehicles)

Make	Year	Type	Motor Vehicle Reg. #	Make	Year	Type	Motor Vehicle Reg. #
Make	Year	Type	Motor Vehicle Reg. #	Make	Year	Type	Motor Vehicle Reg. #

List and Identify All Farm Registered Vehicles and Farm Implements for Which Refund is Claimed

Make and Type	Make and Type
Make and Type	Make and Type

I declare under the penalty of false statement that I have examined this claim, **Form AU-725b**, and, to the best of my knowledge and belief, it is true, complete, and correct. (The penalty for false statement is imprisonment not to exceed one year or a fine not to exceed two thousand dollars, or both.)

Signature	Title	Date
Print Name		

Instructions

Your motor vehicle fuels tax refund claim for diesel fuel used during the calendar year 2000 must:

1. Be filed with the Department of Revenue Services (DRS) on or before May 31, 2001; **AND**
2. Include at least 200 gallons of fuel eligible for tax refund.

Be sure to provide a telephone number where you can be contacted.

You must indicate your Connecticut Tax Registration Number or Social Security Number in the space provided.

For all purchases of fuel listed, you must attach a copy of each numbered slip or invoice that was issued at the time of the purchase. The slip or invoice may be the original or a photocopy and must show the:

- Date of purchase;
- Name and address of the seller (which must be printed or rubber stamped on the slip or invoice);
- Name and address of the purchaser (which must be the name and address of the person or entity filing the claim for refund);
- Number of gallons of diesel fuel being purchased;
- Price per gallon; and
- Total amount paid.

You must maintain records that substantiate your refund claim for at least three years following the filing of the claim and make them available to DRS upon request.

You must include a copy of your current Form OR-248, *Farmer Tax Exemption Permit*. Failure to do so will result in your refund claim being reduced by your Connecticut business use tax liability.

Additional Information

If you need additional information or assistance, please call the Excise/Public Services Taxes Subdivision at **860-541-3225**, Monday through Friday, between the hours of 8:00 a.m. and 5:00 p.m. Forms may also be downloaded from our Web site at: **www.drs.state.ct.us**

YOUR REFUND WILL BE APPLIED AGAINST ANY OUTSTANDING DRS TAX LIABILITY.