Department of Revenue Services State of Connecticut Excise/Public Services Taxes Subdivision 25 Sigourney Street Hartford CT 06106-5032

| Report for per | riod ended |
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| Page | of |

(Rev. 07/02)

Schedule AU-750IM

Import Schedule of Petroleum Products Monthly Report of Motor Fuel Carrier

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|---|---|---|--|--|
| 1. Date of Shipment | 2. Type of Product Loaded | 3. Date of Delivery | 4. Gallons | 5. Name of Boat, Barge, or Vessel |
| 5. Loading Terminal Name | 7. Loading Terminal Address | 7. Loading Terminal Address | | |
| O. Consignor Name | 10. Consignor Address | 10. Consignor Address | | |
| 11. Consignee Name | 12. Consignee Address (actual delivery point) | | | 13. Receiving Terminal TCN |
| | | | | |
| 1. Date of Shipment | 2. Type of Product Loaded | 3. Date of Delivery | 4. Gallons | 5. Name of Boat, Barge, or Vessel |
| 5. Loading Terminal Name | 7. Loading Terminal Address | 7. Loading Terminal Address | | |
| 9. Consignor Name | 10. Consignor Address | | | |
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| 11. Consignee Name | 12. Consignee Address (actual delivery point) | | | 13. Receiving Terminal TCN |
| nd, to the best of my knowle eturn or document to DRS is | r penalty of law that I have examedge and belief, it is true, comple s a fine of not more than \$5,000, he taxpayer is based on all infor | te, and correct. I unders or imprisonment for not | stand that the penalty more than five years | for willfully delivering a false, or both. The declaration o |
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Import Schedule of Petroleum Products General Instructions

Under Conn. Gen. Stat. §12-476a, the Commissioner of Revenue Services directs all companies or persons transporting fuel **into** Connecticut to complete this schedule. File this schedule with the **Department of Revenue Services**, **Audit Division**, **Excise/Public Services Subdivision**, on or before the last day of the month following the month being reported.

Report for period ended: Insert month and year covering activity being reported.

Signature, Title, and Telephone: This form must be signed by its preparer. The preparer must also list his or her title and a phone number where he or she can be reached.

Use **Schedule AU-750 CON**, *Schedule of Petroleum Products,- Monthly Report of Motor Fuel Carrier*, when more than one page is required.

Line Instructions

- **1. Date of Shipment**: Insert date that product was loaded on boat, barge, or vessel.
- **2. Type of Product Loaded**: Insert type of product, for example, gasoline, alcohol, #2 fuel oil, kerosene, aviation fuels, diesel, #6 oil, and any other type of fuel including compounds such as naptha, etc. It is not necessary to indicate the grade of gasoline.
- **3. Date of Delivery:** Insert date that product was pumped from boat, barge, or vessel into storage in the destination state.
- **4. Gallons**: Insert the total number of gallons pumped into storage in the destination state. Gross gallons are preferred, but if not readily available, use net gallons and so indicate.
- **5. Boat, Barge, or Vessel Name**: Insert name of boat, barge, or vessel transporting product.
- **6. Loading Terminal Name**: Insert name of terminal where product was loaded onto boat, barg, or vessel.

- **7. Loading Terminal Address**: Insert address of terminal where product was loaded onto boat, barge, or vessel.
- **8. Loading Terminal TCN**: Insert Terminal Control Number issued by the Internal Revenue Service (IRS).
- **9. Consignor Name**: Insert name of company *shipping* product into Connecticut.
- **10. Consignor Address**: Insert address of company *shipping* product into Connecticut.
- **11. Consignee Name:** Insert name of company *receiving* the product in Connecticut.
- **12. Consignee Address**: Insert address of actual delivery point of product.
- **13. Receiving terminal TCN**: Insert the Terminal Control Number issued by IRS.

Use **Schedule AU-750 CON** when more than one page is required.

For Further Information

If you need additional information or assistance, please call the Excise/Public Services Taxes Subdivision at **860-541-3225**, Monday through Friday, 8:00 a.m. to 5:00 p.m.

You may obtain forms and publications at any hour, seven days a week:

- Internet: Preview and download forms from the DRS web site: www.drs.state.ct.us
- DRS TAX-FAX: Call 860-297-5698 from the handset attached to your fax machine and select from the menu;
- Telephone: Call 1-800-382-9463 or 860-297-5962 and select Option 2 from a touchtone phone.

TTY, TDD, and Text Telephone users only may transmit inquiries 24 hours a day, seven days a week by calling 860-297-4911.