Department of Revenue Services Excise Taxes Unit 25 Sigourney Street Hartford CT 06106-5032 (Rov 11/05)

## Form AU-736

Fuel Type

▶ □ Diesel

► ■ Motor Vehicle Fuels

(Gasoline - Gasohol)

Motor Vehicle Fuels Tax Refund Claim Motor Bus, Taxicab, & Livery. You must check the appropriate fuel type and claim type Claim Type

|  |  | 6. for fuel us    | sed durina                            | be filed on or before calendar year 2005. | ► ☐ Motor<br>Bus      |             | axicab     | ► □ Livery     |  |
|--|--|-------------------|---------------------------------------|---|-----------------------|-------------|------------|----------------|--|
| Name of Claimant (Type or print)   |  |                   | Period of Claim in Calendar Year 2005 |   | For DRS               | Use         | Only       | Audit Number   |  |
|  |  |                   | ▶/through 2005                        |   | Claim Number          | Vouch       | ner Number |                |  |
| Telephone Number   |  |                   | CT Tax Registration Number            |   | Refund Gallons        |             |            |                |  |
| Number a   | nd Street  | -                 | FEIN                                  |   |                       |             |            |                |  |
| Number and Street  |  |                   |                                       |   |                       |             |            |                |  |
| City or Town   |  |                   | SSN                                   |   |                       |             |            |                |  |
| -  |  |                   |                                       |   | Refund \$             |             |            |                |  |
| State  | State ZIP+4  |                   |                                       | Due on or before<br>May 31, 2006          |                       | Reviewed By |            | Date           |  |
| Type of Business Location of Records (if different from above)   |  |                   |                                       |   | Approved By           |             |            | Date           |  |
|  |  |                   |                                       |   |                       |             |            |                |  |
| Schedu   | ule A Statement of Motor Vehicle Fuel Purchases  | . Receipts mus    | st be attache                         | d.  |                       |             |            |                |  |
| Date   | Name of Supplier Gallons of F  |                   | el Date                               | Name of S                                 | Name of Supplier      |             | Ga         | Illons of Fuel |  |
|  |  |                   |                                       |   |                       |             |            |                |  |
|  |  |                   |                                       |   |                       |             |            |                |  |
|  |  |                   |                                       |   |                       |             |            |                |  |
|  |  |                   |                                       | <b></b>                                   |                       |             |            |                |  |
|  |  |                   |                                       | IOTAI (Re                                 | ound to the nearest w | vhole ga    | lon.)      |                |  |
| <b>Taxicab</b><br>Connect<br>L <b>ivery s</b>  | icut General Statutes with each claim filed.<br>o operators must attach a copy of their cer<br>icut General Statutes with each claim filed.<br>service operators (except motor buses) must<br>with each claim filed. Livery service vehicles | attach a cop      | y of their p                          | ermit issued under Ch                     | napter 244b           | of the      | Connec     | ticut General  |  |
| Oshad  |  |                   |                                       |   |                       |             |            |                |  |
| Schedu   |  |                   | in and out of                         | Connecticut by motor bu                   | and at toyingh        |             |            |                |  |
| 1.   |  |                   |                                       | 2   | ises of laxicad       | 5           | 4          |                |  |
| 2.   | Out-of-state mileage Enter the out-of  |                   | •                                     | larters.)                                 |                       |             | 1.<br>2.   |                |  |
| 3.   |  |                   |                                       |   |                       |             | 3.         |                |  |
| 4.   | Total - miles operated on Connecticut roads (Subtract Line 2 from Line 1.)   |                   |                                       |   |                       |             | 4.         |                |  |
|  | Percent of miles traveled on Connecticut roads (Divide Line 3 by Line 1 - carry to .0001.)   |                   |                                       |   |                       |             | 5.         |                |  |
| 5. Total gallons of fuel used (Include actual gallons of fuel used for all purposes.) 6.   6. Fuel used other than in operation of motor buses, taxicabs, or livery. |  |                   |                                       |   |                       |             | 5.         |                |  |
| 0.   | Fuel used other than in operation of motor buses, taxicabs, or livery.<br>(Includes fuel used for cleaning, operation of non-highway equipment, and motor  |                   |                                       |   |                       |             |            |                |  |
|  | vehicles other th  | han motor bus     | es, taxicabs,                         | or livery.)                               |                       |             | 6.         |                |  |
| 7.   | Net operating gallons used exclusively in motor buses, taxicabs, or livery (Subtract Line 6 from Line 5.)  |                   |                                       |   |                       |             |            |                |  |
| 8.   | Gallons used to operate motor buses, taxicabs, or livery on Connecticut roads (Multiply Line 7 by Line 4.)   |                   |                                       |   |                       |             |            |                |  |
| 9.   | Tax Refund Claimed (Multiply Line 8 by per g   | gallon. (See refu | und rate table                        | on reverse side for appro                 | priate rate.)         |             | 9. \$      | .00            |  |
|  |  |                   |                                       |   |                       |             |            |                |  |

Declaration: I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return or document to Department of Revenue Services (DRS) is a fine of not more than \$5,000, or imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.

| Taxpayer Signature  | Title              | Date                   |
|---------------------|--------------------|------------------------|
| Print Taxpayer Name | Telephone Number   | Date                   |
| Print Preparer Name | Preparer's Address | Preparer's SSN or PTIN |

Your motor vehicle fuels tax refund claim for fuel used during calendar year 2005 must:

- 1. Be filed with the Department of Revenue Services (DRS) on or before May 31, 2006; **and**
- 2. Involve at least 200 gallons of fuel eligible for tax refund.

The appropriate fuel type and claim type box must be marked on the front of this form in order to process this claim. You must file a separate **Form AU-736**, *Motor Vehicle Fuels Tax Refund Claim*, for each motor vehicle fuel type and claim type.

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 issued at the time of the purchase. The slip or invoice may be the original or a photocopy and must show:

- 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 fuel purchased;
- Price per gallon;
- Total amount paid; and
- If payment is made within a discounted period, provide proof of amount paid.

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

**Motor bus** companies must attach a copy of their certificate of public convenience and necessity issued under Chapter 244 of the Connecticut General Statutes with each claim filed.

**Taxicab** operators must attach a copy of their certificate of public convenience and necessity issued under Chapter 244a of the Connecticut General Statutes with each claim filed.

**Livery service** operators (except motor buses) must attach a copy of their permit issued under Chapter 244b of the Connecticut General Statutes with each claim filed. Livery service vehicles (except motor buses) are refunded at half the motor vehicle fuels tax rate.

| Table of Motor Vehicle Fuels Tax Refund Rates for 2005   |                 |         |                   |      |              |  |  |  |  |
|--|-----------------|---------|-------------------|------|--------------|--|--|--|--|
| for Motor Buses  |                 |         |                   |      |              |  |  |  |  |
| Diesel   | January 1, 2005 | through | December 31, 2005 | 26¢  | per Gallon   |  |  |  |  |
| Motor Vehicle Fuels  |                 |         |                   |      |              |  |  |  |  |
|  | January 1, 2005 | through | December 31, 2005 | 25¢  | per Gallon   |  |  |  |  |
| for Taxicabs and Livery  |                 |         |                   |      |              |  |  |  |  |
| Diesel   | January 1, 2005 | through | December 31, 2005 | 13¢  | per Gallon   |  |  |  |  |
| Motor Vehicle Fuels  |                 |         |                   |      |              |  |  |  |  |
|  | January 1, 2005 | through | December 31, 2005 | 12.5 | ¢ per Gallon |  |  |  |  |
| Note: You must file a separate <b>Form AU-736</b> for each motor vehicle fuel type and claim type. |                 |         |                   |      |              |  |  |  |  |

For Line 9 Only - Rounding Off to Whole Dollars: You must round off cents to the nearest whole dollar on your motor vehicle fuels tax refund claim. Round down to the next lowest dollar all amounts that include 1 through 49 cents. Round up to the next highest dollar all amounts that include 50 through 99 cents. However, if you need to add two or more amounts to compute the total to enter on a line, include cents and round off only the total.

Example: Add two amounts (\$1.29 + \$3.21) to compute the total (\$4.50) to enter on a line. \$4.50 is rounded to \$5.00 and entered on the line.

Mail the completed refund application to: Department of Revenue Services Excise Taxes Unit 25 Sigourney Street Hartford CT 06106-5032

## **Additional Information**

If you need additional information or assistance, please call the Excise Taxes Unit at **860-541-3224**, Monday through Friday, 8:30 a.m. to 4:30 p.m. Forms may be downloaded from our Web site at **www.ct.gov/DRS** 

Your refund will be applied against any outstanding DRS tax liability.