

Form AU-725a

Motor Vehicle Fuels Tax Refund Claim Gasoline — Farm Use Only

(Rev. 07/01)

Instructions

1. For additional instructions and information see reverse side.
2. Mail original to the Department of Revenue Services (DRS) at the above address.
3. **Refund claims must be filed by May 31, 2002, for gasoline used during calendar year 2001.**

CT Tax Registration Number / Social Security Number		Telephone Number ()		FOR DRS USE ONLY		Audit Number	
Name of Claimant <i>(Type or print)</i>				Claim Number			
Number and Street				Refund Gallons			
City or Town		State	ZIP+4	Refund Tax		\$	
Type of Business		Location of Records <i>(if different from above)</i>		Reviewed By		Date	
Prior Claim Filed for Period Ending / /		Period of Claim From		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 Gasoline Gallons	Taxable Use	Non-taxable Use
	Beginning Inventory			
	Ending Inventory			
Total Use				

Computation of Claim
Multiply total non-taxable use by 25¢ (.25) per gallon \$ _____

List and Identify All Commercially Registered Vehicles Owned or Operated *(No refund for gasoline used in these vehicles) Attach additional sheets, if necessary.*

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 *Attach additional sheets, if necessary.*

Make and Type	Make and Type

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 that the penalty for willfully delivering a false return to DRS is a fine of not more than \$5,000, or imprisonment for not more than 5 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.

Signature	Title	Date
Print Name		

Instructions

Your motor vehicle fuels tax refund claim for gasoline used during calendar year 2001 must:

1. Be filed with DRS on or before May 31, 2002; **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 gasoline 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 gasoline purchased;
- Price per gallon; and
- Total amount paid.

You must retain 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.