

## NCDOR Web-Fill 8-16 E-500S Dry-Cleaning Solvent Tax Return

Legal Name (First 24 Characters)			Period Beginning (MM-DD-YY)
Street Address			Period Ending (MM-DD-YY)
City	State	Zip Code (5 Digit)	Account ID
		Gallons	Rate Tax
1. Halogenated Hydrocarbon-Based Solvent			× <b>\$10.00</b> =
2. Hydrocarbon-Based Solvent			× <b>\$1.35</b> =
3. Total Tax (Add Lines 1 and 2)			
4. Penalty			
5. Interest			
6. Total Due (Add Lines 3, 4, and 5)			\$

Signature:	Date:
I certify that, to the best of my knowledge, this return is accurate and complete.	
Title:	Phone:
	DO Roy 25000 Deleich NC 27640 0740

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MAIL TO: N.C. Department of Revenue, P.O. Box 25000, Raleigh, NC 27640-0710