

# NCDOR Motor Fuels Claim for Refund Tax-Paid Motor Fuel Used Off-Highway

Legal Name (F	First 30 Characters) (USE CAPITAL LETTERS FO	R YOUR NAME AND ADDRESS)			
				Fill in applicabl	e circles:
Trade Name				_	changed since prior refund claim
				Amended ref	ng Gas-1201 refund claim rund claim
Street Address	s	County			claim for closed business
					.C. Income Tax Return
Mailing Addres	SS			Filed 2014 G	as-1201 refund claim
				FEIN or SS	N (No dashes) OFFICE USE ONLY
City		State	Zip Code (First 5 digits)		
Name of Conta	act Person	Phone Number	Fax Number	Pofund f	or Calendar Year
		( )	( )	Refutitu to	or Calendar Tear
Business or A	activity for which Refund is Claimed				2015
	You must complete all applicable Lines	and Parts on this claim to r	receive a refund.		
Part 1. C	Gallonage Accountability				
					Motor Fuel that includes N.C. Road Tax
1.	Beginning inventory of tax-paid m	otor fuel on hand at first	t of year	▶ 1.	
			•		.0
2.	Total gallons of tax-paid motor fue		5	2.	.0
3.	Total gallons of tax-paid motor fuel to be accounted for (Add Lines 1 and 2; must equal Line 7)			3.	0.
4.	Total gallons of tax-paid motor fue requested	el used in off-highway eq	uipment for which refund i	<b>s</b> 4.	0.
5.	Total gallons of tax-paid motor fuel used in licensed vehicles for which no refund is requested			► 5.	.0
6.	Ending inventory of tax-paid motor fuel on hand at end of year			► 6.	.0
7.	Total gallons of tax-paid motor fuel accounted for (Add Lines 4, 5, and 6; must equal Line 3)			7.	0.
Part 2. C	Computation of Refund				3 8
8.	Refund due on tax-paid motor fue (Multiply Line 4 by \$0.3638)	l used in off-highway eq	uipment	8.	
9.	Total gallons of motor fuel used in nonhighway equipment for which sales tax is due			▶ 9.	0.
10.	Sales tax due (Multiply Line 9 by \$0.1605)			10.	
11.	Total gallons of motor fuel used in commercial fishing, commercial logging, railroad farming, and ocean-going vessels for which no sales tax is due			' 🕨 11.	.0
12.	<b>Total Refund Due</b> (Line 8 minus Line 10)			12. \$	

For Office Use Only

# Part 3. Off-Highway Equipment - Attach additional pages if needed.

List off-highway equipment or boats using tax-paid motor fuel on which a refund is requested. Do not list licensed motor vehicles.

Type of Machinery, Equipment, or Boat	How many of each?	Type of Fuel Used	Fuel Tank Capacity

Part 4. Storage Tanks - Attach additional pages if needed.

List the type of fuel stored in bulk tanks and the capacity of each tank.

Tank Number	Fuel Type	Highway or Off-Highway Use	Gallon Capacity of Bulk Tank

Part 5. Licensed Vehicles - Attach additional pages if needed.

List licensed motor vehicles that you own or lease.

Make of Vehicle	Indicate Car or Truck	Type of Fuel Used	If Truck, Gross License Weight

### Part 6. Farms - Attach additional pages if needed.

Farm Refund Information Only

Name of Crop	Number of Acres Cultivated	Name of Crop	Number of Acres Cultivated

Signature:

Title:

Date:

I certify that, to the best of my knowledge, this claim is accurate and complete.

### Claims for Refund are due by April 15, 2016.

# MAIL TO:

North Carolina Department of Revenue Excise Tax Division Post Office Box 25000 Raleigh, North Carolina 27640-0950

## QUESTIONS:

Contact the Excise Tax Division at:Telephone Number(919) 707-7500Toll Free Number(877) 308-9092Fax Number(919) 733-8654