

Motor Fuels Claim for Refund GAS-1200B Taxicabs Transporting Fare-Paying Passengers

North Carolina Department of Revenue

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8. Total gallons of tax-paid motor fuel used in taxicabs to transport fare-paying passengers for which refund is requested										>	8	3.				ļ		.0																			
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Part 3. Licensed Vehicles - Attach additional pages if needed.

13. List licensed taxicabs operated by you on which a refund is requested.

Vehicle Identifica	ation Number	License Tag Number	Type of Fuel Used	Vehicle Owned?	Vehicle Leased?
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. Number of other vehicles,	such as vans or limo	usines, operated by you for hire.		1	
t 4. Storage Tanks - Atta	nch additional pages if n	eeded.			
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Tank Number	in bulk tanks and the	eeded. capacity of each tank. Fuel Type ed from storage tanks listed abo	Gallon Capa		ank

Claims for Refund are due by last day of the month following the close of the quarter.

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) 707-7500
Toll Free Number (877) 308-9092
Fax Number (919) 733-8654