

Instructions for Handwritten Forms

Guidelines



Do not use red ink. Use blue or black ink.



Do not use dollar signs, commas, or other punctuation marks.



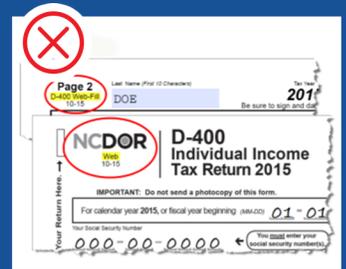
Before You Send



Do not submit photocopies of returns. Submit originals only.



Do not mix form types



Printing



Set page scaling to "none." The Auto-Rotate and Center checkbox should be unchecked.



Do not select "print on both sides of paper."



GAS-1200C Motor Fuels Claim for Refund Qualified Power Takeoff Vehicles

Legal Name (First 30 Characters) (USE CAPITAL LETTERS FOR YOUR NAME AND ADDRESS)

Trade Name

Street Address County

Mailing Address

City State Zip Code (First 5 digits)

Name of Contact Person Phone Number Fax Number

Business or Activity for which Refund is Claimed

Fill in applicable circles:

Address has changed since prior refund claim

First time filing GAS-1200C refund claim

Amended refund claim

Final refund claim for closed business

Filed 2024 N.C. Income Tax Return

Filed 2024 GAS-1200C refund claim

FEIN or SSN (No dashes) OFFICE USE ONLY

Refund for Calendar Year

2025

IMPORTANT: Use a separate form GAS-1200C for each type of vehicle for which a refund is requested. You must complete all applicable Lines and Parts of this claim to receive a refund.

Type of Vehicle for Which Refund is Requested - Fill in applicable circle

Concrete mixing

Solid waste compacting

Tank wagon motor fuel delivery

Mulch blowing

Bulk feed delivery to poultry or livestock

Bulk fertilizer delivery to farms

Bulk lime delivery to farms

Septage Removal

Sweeper

Part 1. Gallonage Accountability

	Motor Fuel that includes N.C. Road Tax
1. Beginning inventory of N.C. tax-paid motor fuel on hand at first of the year	1. <input type="text"/> .0
2. Total gallons of N.C. tax-paid motor fuel purchased during 2025	2. <input type="text"/> .0
3. Total gallons of N.C. tax-paid motor fuel to be accounted for <i>(Add Lines 1 and 2; must equal Line 8)</i>	3. <input type="text"/> .0
4. Total gallons of N.C. tax-paid motor fuel used in licensed vehicles for which no refund is requested	4. <input type="text"/> .0
5. Total gallons of N.C. tax-paid motor fuel used to operate nonhighway equipment for which a refund is requested <i>(Enter amount here and on Part 3, Line 20)</i>	5. <input type="text"/> .0
6. Total gallons of N.C. tax-paid motor fuel used to operate qualified power takeoff vehicles	
a. Number of vehicles	6a. <input type="text"/>
b. Gallons of fuel used <i>(Enter amount here and on Part 3, Line 17)</i>	6b. <input type="text"/>
7. Ending inventory of N.C. tax-paid motor fuel on hand at end of the year	7. <input type="text"/> .0
8. Total gallons of N.C. tax-paid motor fuel accounted for <i>(Add Lines 4, 5, 6b, and 7; must equal Line 3)</i>	8. <input type="text"/> .0

Part 2. Interstate Operations Computation

(If operating only within North Carolina proceed to Line 14.)

Motor Fuel that
includes N.C. Road Tax

- 9. Total miles operated by qualified power takeoff vehicles during 2025**

▶ 9. _____ .0
- 10. Total miles operated outside of N.C. by qualified power takeoff vehicles during 2025**

▶ 10. _____ .0
- 11. Percentage of out-of-state qualified power takeoff vehicle operations**
(Line 10 divided by Line 9)

11. 0. _____
- 12. Total gallons of motor fuel used in qualified power takeoff vehicles for all operations**
(Enter amount here and on Part 3, Line 14)

▶ 12. _____ .0
- 13. Total gallons of motor fuel used in qualified power takeoff vehicles for operations outside of North Carolina**
(Multiply Line 11 by Line 12; enter amount here and on Part 3, Line 15)

13. _____ .0

Part 3. Computation of Refund

- 14. Total gallons of motor fuel used to operate qualified power takeoff vehicles**

▶ 14. _____ .0
- 15. Total gallons of motor fuel used in qualified power takeoff vehicles for operations outside of North Carolina**
(From Part 2, Line 13; enter zero if all vehicles operate only in N.C.)

15. _____ .0
- 16. Total gallons of motor fuel used to operate qualified power takeoff vehicles in North Carolina**
(Line 14 minus Line 15)

16. _____ .0
- 17. Total gallons of N.C. tax-paid motor fuel used for qualified power takeoff vehicles**
(Enter amount from Part 1, Line 6b)

17. _____ .0
- 18. Total gallons of N.C. tax-paid motor fuel subject to refund**
(Enter the smaller of Line 16 or Line 17)

18. _____ .0
- 19. Total gallons of N.C. motor fuel used in qualified power takeoff vehicles for which a refund is requested**
(Multiply Line 18 by 33.33% or 0.3333)

19. _____ .0
- 20. Total gallons of tax-paid motor fuel used in nonhighway equipment for which a refund is requested**
(From Part 1, Line 5)

20. _____ .0
- 21. Total gallons of tax-paid motor fuel for which a refund is requested**
(Add Lines 19 and 20)

21. _____ .0
- 22. Refund due on tax-paid motor fuel used in qualified power takeoff vehicles and nonhighway equipment**
(Multiply Line 21 by \$0.403)

22. _____
- 23. Total gallons of motor fuel used in power takeoff vehicles and nonhighway equipment for which sales tax is due**

▶ 23. _____ .0
- 24. Sales tax due**
(Multiply Line 23 by \$0.251)

24. _____
- 25. Total gallons of motor fuel used in commercial fishing, commercial logging, railroads, farming, and ocean-going vessels for which no sales tax is due**

▶ 25. _____ .0
- 26. Total Refund Due**
(Line 22 minus Line 24)

26. \$ _____

Part 4. Nonhighway Equipment

List nonhighway equipment reported on Part 1, Line 5 for which a refund is requested.
 (Do not list licensed motor vehicles.)

Type of Machinery or Equipment	How many of each?	Type of Fuel Used	Engine Horsepower

Part 5. Tank Wagon Vehicles

List licensed power takeoff tank wagons reported on Part 1, Line 6a for which a refund is requested.
 (Do not list equipment or other qualified power takeoff vehicles that are not tank wagon vehicles.)

Make of Vehicle	Indicate Model of Vehicle	Type of Fuel Used	Gross Registered Weight

Part 6. Storage Tanks

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

Tank Number	Fuel Type	Highway or Nonhighway Use	Gallon Capacity of Bulk Tank

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, 2026.

MAIL TO:
 North Carolina Department of Revenue
 Excise Tax Division
 3301 Terminal Drive, Suite 125
 Raleigh, North Carolina 27604

QUESTIONS:
 Contact the Excise Tax Division at:
 Telephone Number (919) 707-7500
 Toll Free Number (877) 308-9092
 Fax Number (919) 250-7898