

Application for Refund of Tax Paid on Natural Gas Fuel Used for Exempt Purposes

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DR-309641 N. XX/XX Rule 12B-5.150, F.A.C. Effective XX/XX Page 1 of 5

Mail to: Refunds Florida Department of Revenue O Box 6490 Tallahassee FL 32314-6490

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Sales & Use Tax number:											JL			<u> </u>								L									
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13. Total Net Refund R	Requ	est	ed (I	Fror	n P	age	3, P	art	II, L	ine	15)		\$, [],].[
Under penalty of perjury,	I de	cla	re th	hat l	l ha	ive	reac	thi	is a	ppli	cati	ion a	and	the	fac	ts s	tate	d in	it aı	re tr	ue.										
Signature of Applicant																						Da	te								
Printed Name																						_									
Contact Person													Num a co]-[

Who May Apply for Refunds?

Any person who purchases tax-paid natural gas fuel used by a power take-off unit to turn a concrete mixer, compact solid waste, or unload bulk cargo by pumping, may file a claim for refund. However, a person filing such a claim must pay **use tax** on the average net cost per converted gallon as specified under section 212.05, Florida Statutes (F.S.).

Tax Rates: The state tax rates on fuel, county fuel tax rates, and county discretionary sales surtax rates, are published annually in Taxpayer Information Publications (TIPs) and available at **floridarevenue.com/taxes/rates**. The tax rates used to determine the amount of refund due are provided on this application by the Department as specified in sections 206.9955, 206.41, 212.05, and 212.055, F.S. When computing use tax due, include the applicable surtax rate where the fuel is delivered.

For help in completing this form, please contact:

Refunds Florida Department of Revenue 850-617-8585



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C	sed for more than one category type.													
	Fuel us	sed to turn a concrete mixer drum.	•											
	Fuel us													
	Fuel us	sed for unloading bulk cargo by pump	ing.											
Par	t I	Available Units by Product Type	A - Compressed Natural Gas (Pounds)	B - Compressed Natural Gas (Cubic Feet)	C - Liquefied Natural Gas (Pounds)	D - Liquefied Petroleum Gas (Gallons)								
1		ing Inventory (physically measured first day of the refund period)												
2	Units P	Purchased (from Schedule 1A)												
3		Inventory (physically measured on tady of the refund period)												
4	Availab	ole Units (lines 1 plus 2 minus 3)												
Par	t II	Consumption and Conversion												
5 A.	Fuel Us Pumpir	sed to Unload Bulk Cargo by ng												
5 B.	1	sed to Turn a Concrete Mixer Drum n the Manufacturing Process												
5 C.	 	sed to Compact Solid Waste												
6	5B, and	,												
7	Line 6)													
8	<u> </u>	rsion Factor	5.66	126.67	6.06	1.35								
9		Fuel Equivalent Gallons (Divide by Line 8)												
No	te - T	otal Units Eligible for Re	efund cannot	exceed Part 1,	Line 4 (Avail	able Units).								
Par	t III	Calculation of Refund Due	A - Compressed Natural Gas (Pounds)	B - Compressed Natural Gas (Cubic Feet)	C - Liquefied Natural Gas (Pounds)	D - Liquefied Petroleum Gas (Gallons)								
10		Fuel Equivalent Gallons Eligible for I (35% of Line 9)												
11	Averag	Cost - Line 10 multiplied by e Cost per Gallon (From Schedule e instructions)												
12	Fuel Ta multipli	nx Eligible for Refund (Line 10 ed by)												
13		Fax Due (Line 11 multiplied by 6% + ble surtax. Rates listed on ale 1C)												
14	Refund	Due (Line 12 minus Line 13)												
15	Total N	let Refund Requested (Add 14A, 14	4B, 14C, and 14D)											



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	ation r ust be	notor vehic	n the origir refund ail	as (pound	n Gas (gall	α	Invoiced Pr Including T				
<u>s</u>	ollowing inform	of a qualifying n	ou must maintai ehicle with your	Liquefied Natural Gas (pound	Liquefied Petroleum Gas (gall	7	MFEG (Divide Column 5 by Column 6)				
Schedule of Purchases of Tax-Paid Natural Gas Fuels	n addition, the f	the supply tank	or a pipeline, yos fuel for each v			9	Conversion Factor from Units to MFEG (See Instructions)				Totals
Tax-Paid Na	for the refund. I	ed directly into t	om bulk storage -paid natural ga	(spuno	ubic Feet)	5	Units Invoiced				
Purchases of	ation to qualify taxes paid.	hased and place	/ing vehicles fro summary of tax	Compressed Natural Gas (pounds)	Compressed Natural Gas (cubic Feet)	4	Invoice Number				
Schedule of	with your application to qua of purchase and taxes paid	s fuel was purc	aced into qualify Iaily withdrawal	Compress	Compress	3	Date Received				
	e this schedule o validate proof	where natural ga	ider. If fuel is pl must include a c			2	Supplier FEIN				
Schedule 1A	You must complete and include this schedule with your application to qualify for the refund. In addition, the following information r made available upon request to validate proof of purchase and taxes paid.	Invoice from retail station where natural gas fuel was purchased and placed directly into the supply tank of a qualifying motor vehicle.	Invoice from bulk fuel provider. If fuel is placed into qualifying vehicles from bulk storage or a pipeline, you must maintain the origing proof of purchase and you must include a daily withdrawal summary of tax-paid natural gas fuel for each vehicle with your refund	Select Product:		-	Supplier Name				



	Sette dle B	www.age Co	st per Motor F	uel Equivaler	it Gallon
_		- Compres d Natural Gas (Pounds)	B - Compressed Natural Gas (Cubic Feet)	C - Liquefied Natural Gas (Pounds)	D - Liquefied Petroleum Gas (Gallons)
1	Total State and Local Option Fuel Tax Paid on Natural Gas Fuel Purchases: Total from Column 7, Page 3 Schedule 1A multiplied by \$				
2	Total Cost of Purchased Fuel Less State and Local Option Tax: Total of Column 8 from Schedule 1A minus Line 1 from Schedule 1B				
3	Average Cost per Unit: Total of Line 2 from Schedule 1B divided by Column 5 from Schedule 1A, carried out four decimal places				

Reference

The following document was mentioned in this form and is incorporated by reference in the rule indicated below.

The form is available online at **floridarevenue.com/forms** in the Power of Attorney section.

Form DR-835

Florida Department of Revenue Power of Attorney and Declaration of Representative

Rule 12-6.0015, F.A.C.



Computation of Sales Tax and Surtax Due by County

	ledule											
Lice	ise No							Pe	eriod: /	/ to	/	1
Nam	Name:											
Use Sch	ect Product: a separate edule for n product	Co	ompresse quefied N	d Natura atural Ga	l Gas (pou l Gas (cub ls (pounds Gas (gallo	ic f	eet)					
Code	County	Pounds, feet, or gallons, subject to sales tax	ACPG	Rate	Sales tax due		Code	County	Pounds, feet, or gallons, subject to sales tax	ACPG	Rate	Sales tax due
11	ALACHUA						45	LAKE				
12	BAKER					1	46	LEE				
13	BAY					1	47	LEON				
14	BRADFORD					1	48	LEVY				
15	BREVARD]	49	LIBERTY				
16	BROWARD					1	50	MADISON				
17	CALHOUN					1	51	MANATEE				
18	CHARLOTTE					1	52	MARION				
19	CITRUS					1	53	MARTIN				
20	CLAY					1	54	MONROE				
21	COLLIER					1	55	NASSAU				
22	COLUMBIA					1	56	OKALOOSA				
23	DADE (MIAMI-DADE)					1	57	OKEECHOBEE				
24	DESOTO					1	58	ORANGE				
25	DIXIE					1	59	OSCEOLA				
26	DUVAL					1	60	PALM BEACH				
27	ESCAMBIA					1	61	PASCO				
28	FLAGLER						62	PINELLAS				
29	FRANKLIN						63	POLK				
30	GADSDEN					1	64	PUTNAM				
31	GILCHRIST					1	65	ST. JOHNS				
32	GLADES						66	ST. LUCIE				
33	GULF					1	67	SANTA ROSA				
34	HAMILTON					1	68	SARASOTA				
35	HARDEE					1	69	SEMINOLE				
36	HENDRY					1	70	SUMTER				
37	HERNANDO					1	71	SUWANNEE				
38	HIGHLANDS						72	TAYLOR				
39	HILLSBOROUGH						73	UNION				
40	HOLMES					1	74	VOLUSIA				
41	INDIAN RIVER						75	WAKULLA				
42	JACKSON					1	76	WALTON				
43	JEFFERSON						77	WASHINGTON				
44	LAFAYETTE			1		1			<u>.</u>			