



ALABAMA DEPARTMENT OF REVENUE  
 BUSINESS & LICENSE TAX DIVISION  
 MOTOR FUELS SECTION

B&L: DRRR (3)

5/21

P.O. Box 327540 • Montgomery, AL 36132-7540 • (334) 242-9608

Claim For Diesel Fuel Tax Refund – Reduced Rates  
 (NO GASOLINE ALLOWED)

NAME			QUARTER ENDING	
ADDRESS			FEIN OR SSN	
CITY	STATE	ZIP CODE	PHONE NUMBER ( )	
<input type="checkbox"/> Check Here If New Address	EMAIL ADDRESS		CONTACT PERSON	

INDICATE TYPE OF OFF-ROAD BUSINESS:

- Maritime Vessels       Railroad Locomotives       Treatment or Preservation of Wood Products  
 Tractors Used for Agricultural Purposes

Attach a list of all **off-road** vehicles or equipment which you own/rent. **NOTE: Vehicles or equipment may not be designated as both on-road and off-road.**

TAX REFUND COMPUTATION:

1. Total gallons of undyed diesel fuel purchased during the quarter.....	1			
2. Total gallons of undyed diesel fuel purchased which was used off-road for which a refund is claimed. ....	2			
3. Rate of tax refund. ....	3	X	\$ 0.29	
4. Amount of refund claimed. (Line 2 multiplied by line 3.).....	4		\$	

SALES TAX COMPUTATION:

5. Cost of Fuel Refunded.....	5		\$	
6. State Sales Tax Rate (4% of Cost of Fuel.).....	6	X	\$ 0.04	
7. Total Sales Tax Due. (Line 5 multiplied by line 6.).....	7		\$	
8. Net Refund Due (Line 4 minus line 7.).....	8		\$	

INSPECTION FEE COMPUTATION:

9. Total gallons of undyed diesel fuel purchased which was used off-road for which a refund is claimed. ....	9			
10. Inspection Fee Rate (\$0.00025 per gallon).....	10		\$ 0.00025	
11. Inspection Fee Due. (Line 9 multiplied by line 10.).....	11		\$	
12. Net Excise Tax Refund. (Line 4 minus line 7 and minus line 11.).....	12		\$	

Sales Tax Remitted to Alabama Department of Revenue:  Yes (Account No. \_\_\_\_\_)  No

I declare under penalties of perjury that this claim has been examined by me and to the best of my knowledge and belief is true and correct, and that the number of gallons shown in Item 2 does not exceed the total number of gallons of undyed diesel fuel on which I am legally entitled, under the laws of the State of Alabama, and that said petitioner is entitled to such refund under the provisions of Section 40-17-329(h).

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title or Position: \_\_\_\_\_

Any applicant for the refund of taxes who willfully files an inaccurate petition or false claim for a refund shall be subject to a penalty of 100% of the refund claimed, plus interest. Records to clearly substantiate this petition must be maintained by the applicant for a period of six years and must be made available to the Alabama Department of Revenue or its authorized agents upon request. \*FAILURE TO SUBMIT INVOICES ACCEPTABLE TO THE ALABAMA DEPARTMENT OF REVENUE OR TO COMPLETE ALL THE QUESTIONS WILL RESULT IN THIS CLAIM BEING RETURNED TO YOU.

