



Financial Management

96-0466 R03/15 azdot.gov

Mail Drop 521M
Fuel Tax Refund Compliance Unit
Arizona Department of
Transportation
PO Box 2100
Phoenix AZ 85001-2100

**MOTOR VEHICLE/AVIATION FUEL
REFUND APPLICATION**

- Complete online or in black ink
- Mail to the address above

Refund Period Beginning Date *	Refund Period Ending Date *	Federal EIN	Refund Account Number G -
Business Type <input type="checkbox"/> Aggregate <input type="checkbox"/> Construction <input type="checkbox"/> Farm <input type="checkbox"/> Other: <input type="checkbox"/> Golf Course <input type="checkbox"/> Government <input type="checkbox"/> Transportation			
Applicant Name		Business Phone ()	
Doing Business As (DBA)			
Refund Mailing Address	<input type="checkbox"/> Check if changed	City	State Zip
Contact Person Name	Contact Person Phone ()	Contact Email	

A person or entity that is **licensed** in Arizona as a supplier, restricted distributor, IFTA carrier or a use fuel vendor has 3 years from the date the fuel was purchased to file the refund request.

A person or entity that is **not required to be licensed** as a supplier, restricted distributor, IFTA carrier or a use fuel vendor has 6 months from the date the fuel was purchased to file the refund request.

If the claim is less than \$10, only one request may be submitted for any one person or entity in a consecutive 6-month period.

All of the following completed, legible documents must be submitted with this application:

- Fuel purchase invoice copies • Fuel Refund Equipment List, 96-0161 • Flight Log (detailing agricultural purpose of use)
- Motor Vehicle Fuel Log Summary Schedule, 96-0466A • Aviation Fuel Log Summary Schedule, 96-0446B for each aircraft.

ADOT Use	Refund Code	Total Gallons Claimed **	Tax Rate	Amount
OH/GG	UN11		x \$0.18	
OH	UN21		x \$0.18	
AV13	UN31		x \$0.13	
AV05	AF11		x \$0.05	

Total Refund Due *

I certify that the Arizona taxes have been paid on all of the gallons claimed above. The original, unaltered invoices (and supporting documents) for the gallons claimed will be maintained for three years.

Printed Name	Title
Signature (must be original, wet signature)	Date

Must be signed by the licensee or an authorized officer of the business. All other signatures require a notarized power of attorney.

* Refund Period dates must match Refund Period dates indicated on Motor Vehicle Fuel Log Summary Schedule, form #96-0466A and/or Aviation Fuel Log Summary Schedule, form #96-0466B

** Transfer totals from Motor Vehicle Fuel Log Summary Schedule, 96-0466A and/or Aviation Fuel Log Summary Schedule, 96-0446B

ADOT Use

Compliance	Reviewer	Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Approval Date	Postmark Date	
Comments					
Receipts	Date Entered	Entered By	QTRFR Verified	QTRFR Verified Date	Claim Number
Comments					