Department of Revenue Services Excise Taxes Unit 25 Sigourney Street Hartford CT 06106-5032 (Rev. 11/05)

Form AU-737

Motor Vehicle Fuels Tax Refund Claim
Airport Service (Motor Bus)
You must check the appropriate fuel type box on the right. Refund claims must be filed on or before May 31, 2006, for fuel used during calendar year 2005.

Fuel Type ▶ □ Diesel	► ☐ Motor Vehicle Fuels (Gasoline - Gasohol)
Claims Tuma	

Claim Type ► Airport Service (Motor Bus)

	Way 31, 2006,	ioi iuei used	during c	alendar year 2005.						
Name of Claimant (Type or print)			od of Claim i	n Calendar Year 2005.	For DRS Use Only		<i>y</i>	Audit Number		
Telephone Number			/ thi ax Registrat	rough/_ ZUUJ	Claim Number	nber Voucher Numbe				
()			ax riegistiat	ion rumber						
Number a	nd Stroot	FEIN	.I		Refund Gallons					
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City or To	wn	SSN			1					
, and the second					Refund	\$				
State ZIP+4			on or before							
		()	M	ay 31, 2006	Reviewed By			Date		
Type of B	Business Location of Records (if different from all	oove)			Approved By			Date		
					rippiotod by			Date		
Sched	ule A Statement of Motor Vehicle Fuel Purchases. F	Receipts must	be attached	d.						
Date	Name of Supplier G	allons of Fuel	Date	Name of S	Supplier G			allons of Fuel		
		Total (Round to the nearest whole gallon.)								
				Total (iii		viiolo gallori.)				
	bus companies must attach a copy of their centicut General Statutes with each claim filed.	ertificate of p	oublic con	nvenience and neces	sity issued u	under Cha	apter	244 of the		
Sched	ule B Computation of net refund									
	Total miles for period					▶ 1.				
2.	Total fuel gallons for period (Enter the total nu	imher of fue	Laallone	from Schedule A)		▶ 2.				
3.	Average miles per gallon (Divide Line 1 by Lir		ganons	nom ochedate A.j						
				u fue un elument feeilitie						
4.	Total Connecticut miles used for transportatio	n of passen	gers to o	r from airport facilitie	S	▶ 4.				
	5. Refund gallons (Divide Line 4 by Line 3.) ▶ 5.									
6.	Tax refund claimed (Multiply Line 5 by per ga	llon. See refur	nd rate tabl	e on reverse side for app	oropriate rate.)	▶ 6.	\$.00		
true, cor	tion: I declare under penalty of law that I have examined this retemplete, and correct. I understand the penalty for willfully delivering the most for not more than five years, or both. The declaration of a page 1.	g a false return o	r document	to Department of Revenue S	ervices (DRS) is	a fine of not	more t	than \$5,000, or		
Taxpayer	Signature	Title				Date				
Print Tax	payer Name	Telepho	one Number			Date				
Print Prep	parer Name	Prepare	er's Address			Preparer's S	SN or	PTIN		

Instructions

You **must** use black or blue ink to complete your return.

Your motor vehicle fuels tax refund claim for fuel used during calendar year 2005 must:

- Be filed with the Department of Revenue Services (DRS) on or before May 31, 2006; and
- 2. Involve at least 200 gallons of fuel eligible for tax refund.

The appropriate fuel type must be marked on the front of this form in order to process this claim. You must file a separate **Form AU-737**, *Motor Vehicle Fuels Tax Refund Claim*, for each motor vehicle fuel type and claim type.

Be sure to provide a telephone number where you can be contacted.

You must indicate your Connecticut Tax Registration Number, Federal Employer Identification Number (FEIN), or Social Security Number (SSN) in the space provided.

For all purchases of fuel listed, you must attach a copy of each numbered slip or invoice issued at the time of the purchase. The slip or invoice may be the original or a photocopy and must show:

- Date of purchase;
- Name and address of the seller (which must be printed or rubber stamped on the slip or invoice);
- Name and address of the purchaser (which must be the name and address of the person or entity filing the claim for refund);
- Number of gallons of fuel purchased;
- Price per gallon;
- · Total amount paid; and
- If payment is made within a discounted period, provide proof of amount paid.

You must retain records to substantiate your refund claim for at least three years following the filing of the claim and make them available to DRS upon request.

Table of Motor Vehicle Fuels Tax Refund Rates for 2005 for (Airport Service) Motor Buses

Diesel January 1, 2005 through December 31, 2005 26¢ per Gallon

Motor Vehicle Fuels

January 1, 2005 through December 31, 2005 25¢ per Gallon Note: You must file a separate Form AU-737 for each motor vehicle fuel type.

For Line 6 Only - Rounding Off to Whole Dollars: You must round off cents to the nearest whole dollar on your motor vehicle fuels tax refund claim. Round down to the next lowest dollar all amounts that include 1 through 49 cents. Round up to the next highest dollar all amounts that include 50 through 99 cents. However, if you need to add two or more amounts to compute the total to enter on a line, include cents and round off only the total.

Example: Add two amounts (\$1.29 + \$3.21) to compute the total (\$4.50) to enter on a line. \$4.50 is rounded to \$5.00 and entered on the line.

Motor bus companies must attach a copy of their certificate of public convenience and necessity issued under Chapter 244 of the Connecticut General Statutes with each claim filed.

Mail the completed refund application to:
Department of Revenue Services
Excise Taxes Unit
25 Sigourney Street
Hartford CT 06106-5032

Additional Information

If you need additional information or assistance, please call the Excise Taxes Unit at **860-541-3224**, Monday through Friday, 8:30 a.m. to 4:30 p.m. Forms may be downloaded from our Web site at **www.ct.gov/DRS**

Your refund will be applied against any outstanding DRS tax liability.