

Department of Transportation  
Fuel Tax Administration  
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[www.dot.state.wy.us/wydot/business\\_with\\_wy\\_dot/fuel\\_tax/off\\_road\\_refund](http://www.dot.state.wy.us/wydot/business_with_wy_dot/fuel_tax/off_road_refund)

## WYOMING POLITICAL SUBDIVISIONS REFUND REQUEST UNDYED DIESEL and UNDYED BIODIESEL

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Federal ID No: \_\_\_\_\_ Phone No: \_\_\_\_\_

Month & Year or Quarter & Year: \_\_\_\_\_ Undyed Diesel Gallons Claimed: \_\_\_\_\_

Pursuant to W.S. 39-17-209(c)(v)(B), the State of Wyoming or any of its political subdivisions is subject to a fuel tax refund on **Undyed Diesel** gallons consumed by the political subdivision. All fuel is subject to the \$.01 cent per gallon Additional License Tax. [W.S. 39-17-204(a)(ii)]. **REFUND REQUESTS OF LESS THAN \$10.00 WILL BE PROCESSED ONLY ONCE IN EACH CALENDAR YEAR.**

### INSTRUCTIONS FOR FILING THE FUEL TAX REFUND REQUEST

**REQUIRED RECEIPT INFORMATION** (Documents must be receipts or invoices; in-house logs or computer printouts will be disallowed; card lock or key lock printouts from the VENDOR are acceptable.)

- (1) Receipt number
- (2) Date of sale--date of purchase must be within the refund request period
- (3) Name of vendor including address--must be purchased in Wyoming
- (4) Name of purchaser--must be the political subdivision
- (5) Number of gallons purchased
- (6) Price per gallon and total cost of fuel
- (7) Type of fuel purchased—undyed diesel and undyed biodiesel
- (8) Vehicle assigned number or license plate number

**CALCULATION PROCEDURE FOR REFUND: RECEIPTS MUST BE SORTED IN CHRONOLOGICAL ORDER!**

1. Sort and total all undyed diesel gallons purchased in **chronological order** and attach the calculator tape to the receipts or billing invoice(s) by the month or quarter claimed.
2. Enter the total number of undyed diesel gallons claimed for a tax refund above.

By my signature, I attest that I have read and understood this refund request and I attest to the validity of the gallons claimed above.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

RECEIPTS SHALL BE SUBMITTED TO THE DEPARTMENT WITHIN ONE (1) YEAR FOLLOWING THE DATE OF PURCHASE [W.S.39-17-209(c)(v)(C)]. ONCE THE MONTH OR QUARTER IS REFUNDED, AMENDED OR SUPPLEMENTAL REFUND REQUESTS WILL NOT BE ACCEPTED.