

Department of Transportation  
Fuel Tax Administration  
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Cheyenne, WY 82009-3340



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[http://www.dot.state.wy.us/home/business\\_with\\_wydot/fuel\\_tax/off\\_road\\_refund.html](http://www.dot.state.wy.us/home/business_with_wydot/fuel_tax/off_road_refund.html)

## SCHOOL DISTRICTS, COMMUNITY COLLEGES, AND UNIVERSITY OF WYOMING GASOLINE, GASOHOL, UNDYED DIESEL AND UNDYED BIODIESEL TAX REFUND REQUEST

Please complete all blanks on this form.

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

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

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

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

Month & Year Claimed: \_\_\_\_\_

Gasoline/Gasohol Gallons Claimed: \_\_\_\_\_ Undyed Diesel Gallons Claimed: \_\_\_\_\_

Pursuant to W.S. 39-17-109(c)(ii) and W.S. 39-17-209(c)(v)(D), the license tax on gasoline and undyed diesel fuel consumed by the educational entity, the University of Wyoming, community college, or public school located in Wyoming, is subject to refund. The record of purchases shall be submitted **monthly**. All fuel is subject to the \$.01 cent per gallon Additional License Tax pursuant to [W.S. 39-17-104(a)(iii) and W.S. 39-17-204(a)(ii)].

### INSTRUCTIONS FOR FILING THE FUEL TAX REFUND REQUEST

**REQUIRED 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 and address of seller/vendor--must be purchased in Wyoming
- (4) Name of purchaser--must be the school district, community college or the University of Wyoming
- (5) Number of gallons purchased
- (6) Price per gallon, including all applicable taxes and total cost of the fuel
- (7) Type of fuel purchased-- gasoline/gasohol, undyed diesel and undyed biodiesel
- (8) Vehicle number--an assigned unit number or license plate

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

1. Sort all purchases by fuel type, gasoline/gasohol or undyed diesel/biodiesel. Total each fuel type gallons purchased **in chronological order** and attach the calculator tape or spreadsheet to the receipts or billing invoices.
2. Enter the total number of gasoline/gasohol or undyed diesel/undyed biodiesel gallons claimed above.

**I have read and understood this refund request, and the gallons claimed above are valid.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Title

**The refund form and receipts are invalid if not submitted to the department within one (1) year following the date of purchase. [W.S. 39-17-109(c)(ii) and 39-17-209(c)(v)(D)].**