



STATE OF MAINE  
 MAINE REVENUE SERVICES  
 P.O. BOX 1065  
 AUGUSTA, MAINE  
 04332-1065

ADMINISTRATIVE & FINANCIAL SERVICES

RYAN LOW  
 COMMISSIONER

JOHN ELIAS BALDACCI  
 GOVERNOR

JEROME D. GERARD  
 ACTING EXECUTIVE DIRECTOR

## MAINE REVENUE SERVICES SALES, FUEL & SPECIAL TAX DIVISION REQUEST FOR SALES TAX REFUND

To ensure prompt processing of this application, please fill in all applicable lines and attach all pertinent information.

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_ Federal ID # \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Contact Person \_\_\_\_\_

Telephone # \_\_\_\_\_

AMOUNT OF REFUND REQUEST \$ \_\_\_\_\_ (Additional information may be required)

### WHAT SHOULD BE INCLUDED WITH THE APPLICATION?

- 1 **If tax was paid to a retailer and not directly to Maine Revenue Services, the refund(s) should be obtained from the retailer. If the retailer refuses to issue the refund, documentation indicating such from the retailer must be included with this application.**
2. Cover letter explaining the reason for the refund request.
3. Proof tax was paid. (copies of invoices, etc.)
4. Any other pertinent information.
5. If the refund is for tax paid on a motor vehicle, boat or other vehicle please send a copy of the registration, including: Year; Make; Model; VIN number; Plate number; Place and Date of registration.

- \* *Refunds are disallowed when an application is received more than 3 years after the date of over payment.*
- \* *This refund request is considered incomplete until all requested additional information has been timely received.*
- \* *Failure to provide additional information could result in a denial of your request.*

I certify under the pains and penalty of perjury that the statements made in this application and any attachments thereto are true, accurate and complete to the best of my knowledge and belief.

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

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Mail Application & Documentation to:  
**Maine Revenue Services**  
**Sales, Fuel & Special Tax Division**  
**P.O. Box 1065**  
**Augusta, ME 04332-1065**