

**MFR-43** (Rev. 2/08)  
Application for Refund  
Non-Highway Use of Taxable  
Clear Diesel Fuel



**Mailing Address**  
Georgia Department of Revenue  
Motor Fuel Tax Unit  
Refund Section  
1800 Century Center Blvd NE  
Suite 8223  
Atlanta, GA 30345-3205

FEIN: \_\_\_\_\_

SSN: \_\_\_\_\_

Period Covered: From: \_\_\_\_\_ To: \_\_\_\_\_

Claim may be filed for the 7 ½ cents per gallon excise tax on the non-highway use of taxable clear diesel fuel. Refund claim must be filed within 18 months of the taxable clear diesel purchase.

1. Name of Applicant (Name In Which Clear Diesel Was Purchased):

\_\_\_\_\_

2. Doing Business As (dba):

\_\_\_\_\_

3. Location Address:

\_\_\_\_\_

4. Mailing Address:

\_\_\_\_\_

5. City State Zip

\_\_\_\_\_

6. Quantity of Clear Diesel Fuel Purchased During Period:  
(Total of Invoices Listed on Reverse Side)

\_\_\_\_\_

7. Plus Bulk Clear Diesel Fuel Inventory Brought Forward From Previous Claim:

\_\_\_\_\_

8. Less: Quantity of Clear Diesel on Hand at End of Period: (\_\_\_\_\_)

9. Less: Quantity of Clear Diesel Used On-Highway (\_\_\_\_\_)

10. Total Clear Diesel Fuel Gallons on Which Refund is Claimed:  
(Add Lines 6 & 7 and subtract Lines 8 & 9 = Line 10)

\_\_\_\_\_

State Of Georgia: (county) \_\_\_\_\_

\_\_\_\_\_ personally appeared before me who, being by me first duly sworn  
(Claimant)

deposes and says under oath that he/she is applying for the refund of off-highway use of clear diesel fuel in the State of Georgia and is true and correct that all of the above stated clear diesel fuel was used for non-highway purposes.

**Reason clear diesel used off-highway?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Claimant (Print Name): \_\_\_\_\_

Signature of Claimant: \_\_\_\_\_

Title of Claimant: \_\_\_\_\_

Date of Claim: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

**DO NOT USE THIS SPACE**  
Approved Gallons @ 7 ½ cents

\_\_\_\_\_  
Tax Examiner