RESCINDED SALE
CLAIM FOR SALES/USE TAX REFUND OR CREDIT

PART A (To be completed by original purchaser)
1. Purchaser(s) name and address: ______________________________________________________________________
   Phone: __________________
2. Date tax paid: _______________ 3. Amount Tax Claimed: _________________
4. Check the statements that apply to this request: I(We) request:
   a) ___ sales/use tax refund or
   b) ___ credit to be applied to tax due on replacement vehicle,
   c) ___ trade-in voucher to transfer trade from defective vehicle to replacement vehicle
5. Has an Arkansas title been issued on the returned vehicle? ___ Yes ___ No
6. Please attach a legible copy of the Vehicle Registration Certificate/Tax Receipt issued by the Revenue Office
   for the returned vehicle and sign below.

PART B (To be completed by original seller)
1. Seller(s) name and address: _________________________________________________________________________
   Phone: ________________________
2. Description of returned vehicle, including VIN: _________________________________________________________
3. Reason vehicle was returned: ________________________________________________________________________
4. Amount refunded to purchaser: __________________________ Date of Refund: ______________________________
5. Description of replacement vehicle, including VIN: ______________________________________________________
6. Sales price of replacement vehicle: ___________________________________________________________________
7. Check one of the following statements:
   __ a. Seller certifies that it has refunded Purchaser all consideration paid for the purchase of the returned vehicle
       described in Part B2 that it has retaken possession of that vehicle and that the sale of the vehicle has been
       rescinded. Any lien, which Seller may have against the returned vehicle, is hereby released.
   __ b. Seller certifies that possession of the vehicle described in Part B2 has been returned to it by purchaser in exchange
       for the replacement vehicle described in Part B5, that the sales price stated above is correct and that the sales of the
       returned vehicle has been rescinded. Any lien, which Seller may have against the returned vehicle, is hereby
       released.
8. Please attach a copy of the front and back of the title to the returned vehicle evidencing assignment by the purchaser(s) and
   release of lien, and sign below. Also send all documentation regarding the agreement to rescind the sale, i.e. cancelled Bill
   of Sale, Copy of Refund Check, Lemon Law Arbitration Documents, etc.

I declare under penalty of perjury that the information, documentation and representations that I have provided are true and correct. I
understand that I may be liable for any tax deficiency, which results from submitting false information or documentation on this claim.

PURCHASERS

__________________________

DATE: ______________________

SELLERS

__________________________

DATE: ______________________

Please return completed form and required documentation to:
DF&A/Revenue Division-Tax Credits/Special Refunds Section
PO Box 8054 – Little Rock, AR  72203
Phone:  501-682-7106
Fax:  501-682-4986

Revised 10/00