



STATE OF ARKANSAS
**Department of Finance
 and Administration**

REVENUE DIVISION
 MOTOR FUEL TAX SECTION
 P. O BOX 1752
 LITTLE ROCK, AR 72203-1752
 Phone: (501) 682-4800
 Fax:(501) 682-5599
 www.arkansas.gov/dfa

**FUEL PRODUCED FOR INDIVIDUAL USE
 Report Form**

CALENDAR YEAR _____

PLEASE PRINT OR TYPE

Name _____ FEIN/SSN _____

Mailing Address _____ Phone Number _____

City _____ State _____ Zip Code _____

Physical location of production facility _____

- 1) Total Gallons of Fuel Produced..... _____
- 2) Number of gallons of Oil produced for non-highway purposes _____
- 3) Number of gallons of Oil produced for use in highway vehicles..... _____
- 4) Arkansas Clear Diesel Tax Rate (View current Tax Rate at www.dfa.arkansas.gov/motorfueltax) _____
- 5) **ARKANSAS MOTOR FUEL TAX DUE** (Multiply Line 3 by Line 4).....\$ _____

PLEASE MAKE CHECK PAYABLE TO THE DEPARTMENT OF FINANCE & ADMINISTRATION
 AND MAIL TO : **MOTOR FUEL TAX SECTION P.O. BOX 1752 LITTLE ROCK, AR. 72203-1752**

APPLICANT AGREES, UNDER PENALTY OF PERJURY, THAT THE INFORMATION GIVEN ON THIS FORM IS, TO THE BEST OF
 THEIR KNOWLEDGE, TRUE, ACCURATE AND COMPLETE.

 Applicant's Signature Date

*THIS REPORT DOES NOT INCLUDE THE FEDERAL EXCISE TAX