

Department of Taxation and Finance

Claim for Highway Use Tax (HUT) Refund Tax Law - Article 21, Section 513

DTF-406

| Type or print in ink. | | | | | | | For office use only | | | | |
|--|--|---------------------|---|------------------------|------------------|------------------|-----------------------------------|-------------|----------------|------------------|--|
| Employer identification number or Sc | | | Social Security number | Date (mm | Date (mmddyyyy) | | efund approve | d | | | |
| Name of carrie | er | | | | | Audite | ed by | | | Date | |
| Street address | | | | | | | Approved by | | | Date | |
| City, village, or post office State | | | | ZIP code | е | Appro | ved by | | | Date | |
| | | | within four years from efund (mark an X in th | | | | | | | | |
| | orm MT-927, H opy of Form MT-9 | | y Use Tax (HUT) Ove | rpayment Ad | djustment Notic | ce (Ent | er the refund | l amount oi | n line 2 below | and attach a | |
| Certificate of Registration (C of R) and decal fees paid in error (Explain below, complete the Refund summary, and attach the duplicate C of Rs and decals.) | | | | | | | | | | | |
| · | Highway use tax paid in error If you filed an amended tax return on paper, explain below, complete the <i>Refund summary</i>, and attach a copy of your amended tax return. | | | | | | | | | | |
| • | - | | ded tax return using W efund summary. Do no | | | | | | | | |
| D _ C | ther (Explain be | low an | d complete the Refund s | ummary. <i>Enci</i> | lose amended ta | ıx returi | ns, if applica | ble.) | | | |
| Explanation | for boxes B, C | , and [| D (attach additional shee | ets if necessar | у) | | | | | | |
| D. f d | | | | | | | | | | | |
| Refund summary (attach additional saturation and sa | | | | | | | amount | | Refund claimed | | |
| Tax peri | lax period of C of K flumber | | Amount origin | Amount originally paid | | Corrected amount | | | - Telulia c | iaiiicu | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 1 Total (add the Refund claimed column amounts) | | | | | | | | 1 | | | |
| 2 Amoun | t from Form MT | -927 | | | | | | 2 | | | |
| 3 Total refund claimed (add lines 1 and 2) | | | | | | | | 3 | | | |
| knowledge th Law, punishal | at willfully providi | ng fals ial fine | claim is true, complete, e or fraudulent informatio and possible jail sentend t. | on with the int | ent to evade tax | may co | onstitute a fe | lony or oth | er crime under | r New York State | |
| Authorized | Printed name of authorized person Signature of authorized person | | | | | | Official title | | | | |
| person | Email address of authorized person | | | | | | Telephone number Date | | | | |
| Paid | Firm's name (or yours if self-employed) | | | | | Firm's | Firm's EIN Preparer's PTIN or SSN | | | | |
| preparer use | Signature of individ | dual pre | eparing this return | Address | | | Ci | ty | State | ZIP code | |
| only | Email address of in | ndividus | al preparing this return | Telephone num | nher Pr | enarer's | NYTPRIN | NYTP | PRIN Da | ate | |

Telephone number

(see instr.)

Email address of individual preparing this return

NYTPRIN

excl. code

Date

Preparer's NYTPRIN

Instructions

General information

Use Form DTF-406 to request a refund of the highway use tax for:

- a credit for overpayment as shown on Form MT-927, Highway Use Tax (HUT) Overpayment Adjustment Notice,
- · a duplicate payment made for a certificate of registration, or
- an overpayment shown on your amended Form MT-903, Highway Use Tax Return.

You must file your claim for the HUT refund within four years from the due date of the return (Form MT-903) that the credit was accrued, or within four years of any erroneous payment.

Note: When the due date falls on a Saturday, Sunday, or legal holiday, the claim for refund may be filed on the next business day.

Examples: A claim for refund of a credit accrued in the monthly period ending January 31, 2017 (due February 28, 2017), must be filed on or before March 1, 2021. A claim for refund of a credit accrued in the quarterly period ending March 31, 2017 (due May 1, 2017), must be filed on or before May 3, 2021. In the case of a credit accrued in the yearly period ending December 31, 2017 (due January 31, 2018), a claim for refund must be filed on or before January 31, 2022. In the case of an erroneous payment made on August 17, 2017, a claim for refund must be filed on or before August 17, 2021.

Instructions

Mark an X in the appropriate boxes to indicate the reason for the refund

Box A – If you received Form MT-927 and the credit will not be used on future returns, enter the amount of refund on line 2 of the *Refund summary*. Enclose a copy of Form MT-927.

Box B – If you paid for and received duplicate C of Rs and decals in error, include the reasons in the *Explanation* area. Enter the C of R numbers in the *Refund summary*, and enclose the C of Rs along with the decals.

Box C – If you paid the highway use tax in error, (examples include an exempt carrier, excluded vehicle, or calculation error), complete the *Explanation* area and *Refund summary*.

- If you are exempt from the highway use tax, explain why you are exempt.
- If your vehicle is excluded from highway use tax, describe your vehicle and indicate which type of excluded vehicle it is.
- · If you made any calculation errors on your return, explain them.

Note: If you are not using **Web File**, you can get Form MT-903 from the Tax Department's website or by phone. See *Need help?*.

Box D – If you believe you should receive a refund for a reason not related to boxes A through C. Explain the reason in the *Explanation* area and complete the *Refund summary*. Enclose amended tax returns, if applicable.

Certification

Sign and date the refund claim form and enter your official title and telephone number. Only the taxpayer or an authorized agent may sign the refund claim form.

If anyone other than an employee, owner, partner, or officer of the business is paid to prepare the claim, see *Paid preparer's* responsibilities below.

Paid preparer's responsibilities

Under the law, all paid preparers must sign and complete the paid preparer section of the form. Paid preparers may be subject to civil and/or criminal sanctions if they fail to complete this section in full.

When completing this section, enter your New York tax preparer registration identification number (NYTPRIN) if you are required

to have one. If you are not required to have a NYTPRIN, enter in the *NYTPRIN excl. code* box one of the specified 2-digit codes listed below that indicates why you are exempt from the registration requirement. You **must** enter a NYTPRIN **or** an exclusion code. Also, you must enter your federal preparer tax identification number (PTIN) if you have one; if not, you must enter your SSN.

| Code | Exemption type | Code | Exemption type |
|------|------------------------|------|--|
| 01 | Attorney | 02 | Employee of attorney |
| 03 | CPA | 04 | Employee of CPA |
| 05 | PA (Public Accountant) | 06 | Employee of PA |
| 07 | Enrolled agent | 08 | Employee of enrolled agent |
| 09 | Volunteer tax preparer | 10 | Employee of business preparing that business' return |

Privacy notification

New York State Law requires all government agencies that maintain a system of records to provide notification of the legal authority for any request for personal information, the principal purpose(s) for which the information is to be collected, and where it will be maintained. To view this information, visit our website, or, if you do not have Internet access, call and request Publication 54, *Privacy Notification*. See *Need help?* for the Web address and telephone number.

Need help?



Visit our website at **www.tax.ny.gov**

- · get information and manage your taxes online
- · check for new online services and features

Telephone assistance

Miscellaneous Tax Information Center: 518-457-5735

To order forms and publications: 518-457-5431

Text Telephone (TTY) or TDD Dial 7-1-1 for the equipment users New York Relay Service