

WEST VIRGINIA STATE TAX DEPARTMENT

AFFIDAVIT FOR AN INDIVIDUAL FILING A CLAIM OF REFUND FOR CONSUMERS SALES AND SERVICE TAX OR USE TAX

See requirements on reverse side

NAME	
STREET ADDRESS	
CITY, STATE, ZIP CODE	
TELEPHONE NUMBER	

STATE OF WEST VIRGINIA

COUNTY OF _____.

I, _____, being duly sworn, depose and say that on _____
(Name) (Date)

I purchased from _____
(Business Name and Address)

the following tangible personal property or services: _____

This purchase is exempt from Consumers Sales and Service Tax or Use Tax for the following reason:

I was charged \$ _____ Consumers Sales and Service or Use Tax on this purchase and the tax has not been refunded to me. As **proof**, I have enclosed a copy of my invoice showing the date of purchase and the amount of tax paid.

(Signature) (Date)

Taken, subscribed and sworn before me this _____ day of _____, 20 _____.

My commission expires on _____.

(NOTARY SEAL)

(Notary Public)

REQUIREMENTS FOR A REFUND OF CONSUMERS SALES AND SERVICE TAX OR USE TAX

1. The front of this document must be completed giving a detailed explanation of the circumstances giving rise to the requested refund. **This document must be notarized.**
2. You **must** attach a copy of the invoice or other documentation showing the tax was paid. If you paid six percent (6%) Consumer Sales Tax to a vendor on the purchase of a boat or other recreational vehicle on which you later paid the five percent (5%) Motor Vehicle Privilege Tax, you must attach a copy of the sales receipt from the vendor showing the six percent (6%) Consumer Sales Tax paid; **and**, a copy of the receipt from the Department of Motor Vehicles showing the five percent (5%) Motor Vehicle Privilege Tax paid.
3. You **must** identify the business from which the purchase was made.

MAIL TO:

WEST VIRGINIA STATE TAX DEPARTMENT
TAX ACCOUNT ADMINISTRATION DIVISION
P.O. BOX 1826
CHARLESTON, WV 25327-1826

FOR ASSISTANCE CALL:

(304) 558-3333, OR
TOLL FREE: 1-800-WVA-TAXS (1-800-982-8297)
