| Comptroller of Public Accounts FORM | 06-215<br>(Rev. 3-06/13) |       |
|-------------------------------------|--------------------------|-------|
| a. Deca                             | als T Code •             | 40100 |

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## TEXAS REQUEST/PAYMENT FOR PREPAID LIQUEFIED GAS DECAL

• PLEASE READ INSTRUCTIONS

| EPAID LIQUE                   | EFIED GAS DECA  | • D0                         | • DO NOT WRITE IN SHADED AREAS |                                   |  |  |  |  |
|-------------------------------|---|------------------------------|--------------------------------|-----------------------------------|--|--|--|--|
| axpayer number                | r number d. Date due  |                              |                                |                                   | e. <u>FOR COMPTROLLER'S USE ONLY</u> MISCAPP □ ■ 00991 |  |  |  |
|                               |   |                              |                                |                                   |  |  |  |  |
| Taxpayer nam                  | e and mailing address (Make ne                                    | cessary name and address     | changes below)                 |                                   | / reason code ■ 4029                                   |  |  |  |
|                               |   |                              |                                |                                   | il reference number                                    |  |  |  |
|                               |   |                              |                                |                                   |  |  |  |  |
|                               |   |                              |                                |                                   |  |  |  |  |
|                               |   |                              |                                | TEMPORA<br>DECAL N                |  |  |  |  |
| -                             |   |                              |                                |                                   | FOR STATE AGENCY USE ONLY                              |  |  |  |
|                               |   |                              |                                | INTERAGEN<br>PAYMENT              | ICY •  |  |  |  |
| 1. Period                     | 2. Vehicle / decal no.  | 3. Vehicle loc. no.          | // Fuel type                   | DOCUMENT    5. Motor vehicle iden |  |  |  |  |
| 1. Periou                     | 2. Veriicie / decai iio.  | 3. Vehicle loc. no.          | 4. Fuel type                   | 5. Motor verilicle iden           | unication number                                       |  |  |  |
| •                             | •   |                              | •                              | •                                 |  |  |  |  |
| 6. Model year                 | 7. Make   | 8. Registered gross we       | eight 9. Cla                   | ass 10. Veh                       | nicle Texas license no.                                |  |  |  |
|                               | •   | •                            |                                | T                                 | X  |  |  |  |
|                               |   |                              |                                |                                   |  |  |  |  |
|                               | one of the following (if appli<br>em removed                      |                              |                                |                                   | Month Day Year   |  |  |  |
| Other                         |   | e soiu veriicie              | ,                              |                                   |  |  |  |  |
|                               |   |                              |                                |                                   |  |  |  |  |
| 12. Enter current             | odometer mileage (Whole n   | niles)                       |                                | 12. •                             |  |  |  |  |
| 13 Previous ado               | meter mileage   |                              |                                | 13 •                              |  |  |  |  |
|                               | · ·   |                              |                                |                                   |  |  |  |  |
| 14. Out-of-state r            | miles driven (See instructions                                    | s for requirements)          |                                | 14. •                             |  |  |  |  |
| 15. Miles driven i            | n Texas   |                              |                                | 15. •                             |  |  |  |  |
|                               |   |                              |                                | ¢                                 |  |  |  |  |
| 16. Amount due a              | as shown in the Schedule of                                       | Prepaid Liquefied Gas        | Fees                           | 16. • <sup>•</sup>                |  |  |  |  |
|                               | e information in this document an<br>yer or duly authorized agent | d in any attachments is true | e and correct to the be        |                                   |  |  |  |  |
| sign here                     | yer or duly admonzed agent  |                              | Date                           | Bu                                | usiness phone  |  |  |  |
|                               | For Fuels Tax assistance of                                       | call 1-800-252-1383 toll     | free nationwide. T             | he Austin number is               | 512-463-4600.  |  |  |  |
|                               |   |                              |                                |                                   |  |  |  |  |
| 5 (D 2 0/12)                  |   | DO NOT T                     | EAR OFF                        |                                   |  |  |  |  |
| 5 (Rev. 3-06/13)  CAS PAYMENT | COUPON FOR  |                              |                                |                                   |  |  |  |  |
|                               | ED GAS DECAL  |                              | g. <b>=</b>                    |                                   |  |  |  |  |
| Code <b>■</b> 40020           | 17. Taxpayer number   | 18. Perio                    | d                              | 19. Vehicle / dec                 | al no.   |  |  |  |
| Code ■ 40020                  |   |                              | -                              | -                                 |  |  |  |  |
|                               | 20 Taynayar rama  | I                            |                                |                                   |  |  |  |  |
|                               | 20. Taxpayer name   |                              |                                |                                   |  |  |  |  |
|                               |   |                              |                                |                                   |  |  |  |  |
|                               |   | )1 F                         | NTER THE AMOU                  | INT -                             | •  |  |  |  |
|                               |   | 0                            | F YOUR PAYMEN                  | IT                                |  |  |  |  |
|                               |   | F                            | OR THIS VEHICLE                | 21. ■ ـ                           |  |  |  |  |
| lake the amount in Item       | 21 payable to: STATE TREAS  | URER                         | i. PM Date                     | j                                 |  |  |  |  |
| ail this complete form a      | and your payment to:  |                              |                                |                                   |  |  |  |  |
| 111 F. 1                      | rroller óf Public Accoul<br>17th Street<br>TV 78774 0100          | NIS                          |                                |                                   |  |  |  |  |
| Austin,                       | TX 78774-0100   |                              |                                |                                   |  |  |  |  |

## **TEXAS REQUEST / PAYMENT FOR PREPAID** LIQUEFIED GAS DECAL

## **GENERAL INFORMATION**

WHO MUST FILE - File this request/payment if you own or operate a motor vehicle licensed in Texas that is equipped to use liquefied gas or liquefied gas interchangeably with another motor fuel:

- for renewal of a current decal for the following year, and/or
  to get a decal for a vehicle requiring one for the first time.

NOTE: If you have not previously filed for any form of liquefied gas decals, you must also file a "Texas Application for Prepaid Fuels Tax Permit/ Decal" (Form AP-170) with this request/payment for decal(s).

INTERSTATE TRUCKERS - Vehicles licensed under the International Fuel Tax Agreement (IFTA) are not required to display a liquefied gas tax decal. A vehicle specific letter of exemption will be required when undergoing safety inspections and refueling IFTA interstate vehicles. Exemption letters may be obtained by writing to the attention of the Account Maintenance Division.

- PRINT ALL INFORMATION
- Do not write in shaded areas.

## **SPECIFIC INSTRUCTIONS**

- Item f Enter the correct name and mailing address where you want to receive your decal. Check all information preprinted for renewals. If any item is incorrect, draw a line through the item and write in the correct information.
- Item 1 Enter the year and month that the vehicle began using liquefied gas or a form of liquefied gas.

Example: For January 1995, enter 9501.

Item 4 - Enter the type of liquefied gas used by your vehicle.

Example: 001 - Propane (LPG)

002 - Compressed natural gas (CNG) 003 - Liquefied natural gas (LNG)

Item 7 - Enter the first three letters of the manufacturer's name.

Example: "FOR" for Ford.

- Enter the registered gross weight shown on the registration Item 8 certificate issued by the Texas Department of Transportation.
- Item 11 If you no longer own this vehicle or if the vehicle is no longer operated using liquefied gas, you must enter the date the vehicle was sold or the system was removed from the vehicle.
- Item 12 Enter the current odometer reading. WHOLE MILES

NOTE: If item 12 is blank or the speedometer is broken, the fee will be assessed at the rate of 15,000 miles and over.

Item 14 - Enter the miles driven outside of Texas. - WHOLE MILES

NOTE: Attach a record of miles driven in other states for deduction to be allowed.

- Item 15 Enter miles driven in Texas.
   For a renewal, Item 12 minus Items 13 and 14.
  - For a new vehicle, estimate the miles to be driven in Texas during the following 12 months.

NOTE: If you no longer own this vehicle, furnish the date and disposition for possible refund or credit. When requesting a refund for a decal, you must return the decal or send a notarized statement that the liquefied gas system was removed prior to sale.

| PREPAID LIQUEFIED GAS FEES   |             |                            |                            |                              |                               |  |       |   |  |
|--|-------------|----------------------------|----------------------------|------------------------------|-------------------------------|--|-------|---|--|
| VEHICLE WEIGHT   | CLASS       | Less than<br>5,000 miles   | 5,000 to<br>9,999 miles    | 10,000 to<br>14,999 miles    | 15,000 miles<br>and over      | OTHER VEHICLES<br>(Rate not based on weight) | CLASS | ANNUAL<br>FEE   |  |
| Less than 4,000 lbs.<br>4,000 to 10,000 lbs.<br>10,001 to 15,000 lbs.  | A<br>B<br>C | \$ 30.00<br>42.00<br>48.00 | \$ 60.00<br>84.00<br>96.00 | \$ 90.00<br>126.00<br>144.00 | \$ 120.00<br>168.00<br>192.00 | Transit company motor buses                  | Т     | \$ 444.00   |  |
| 15,001 to 27,500 lbs.<br>27,501 to 43,500 lbs.<br>43,501 lbs. and over | D<br>E<br>F | 84.00<br>126.00<br>186.00  | 168.00<br>252.00<br>372.00 | 252.00<br>378.00<br>558.00   | 336.00<br>504.00<br>744.00    | Motor vehicle dealer (No dealer fee)         | Z     | Motor vehicle dealer must pay tax<br>to permitted liquefied gas dealer<br>when vehicle is fueled. |  |