

CLAIM FOR REFUND

(Specialized Business Group ONLY)

SBG Division Refund

- ☐ – Auto Industry
- ☐ – Liquor
- ☐ – Tobacco
- ☐ – Marijuana
- ☐ – Racing

No CASH REFUNDS. Refunds will be issued via State warrant.

- * Submit separate claim form for each type of fee refund being requested.
- * Application fees are NOT refundable; Only refundable fees/taxes will be refunded by Division.
- * Refunds will ONLY be issued in the name of the Applicant/Licensee to which the funds were posted.
- * Change of address may be incorporated on this form; but, is subject to verification by Division.
- * Periods can be combined by fee/tax type.
- * Errors/Omissions/Verifications may delay timing of refunds.

Refund to be made payable to and mailed to ONLY Applicant/Licensee as reflected in Division Records

Applicant/Licensee Name:

Mailing Address: [If requesting change of address, please check box ☐

City:

State:

ZIP:

License/Fee/Tax Type:

License No., if issued:

FEIN/SSN:

Original Amount Paid:

Date Paid:

Refund Requested:

Reason for Refund Requested: [Explain below or on separate sheet.][Attach supporting documentation.]

Application Withdrawn: Check box: ☐ [Division will determine applicability of refund and amount]

I declare under penalty of perjury in the second degree that this claim including all attachments is to the best of my knowledge true and correct and that the named Applicant/Licensee is the same as the original payee.

Applicant/Licensee Name:

Telephone:

Date:

Signature of Requestor:

Licensing Approval:

Chief Approval:

(MED Only)

Director: