

## Montana Department of Transportation Motor Fuel Section Declaration of Dyed Fuel Used on Public Road Projects

2701 Prospect Ave PO Box 201001 Helena MT 59620-1001 Phone: 406-444-0806 Fax: 406-444-5411 TDD: 406-444-7696 www.mdt.mt.gov

## Information:

Use this form to report and pay the state fuel tax on equipment containing dyed fuel being used on Public Road Projects.

Keep a copy of this form on the project to show fuel taxes have been paid in the event a Motor Carrier Enforcement Officer checks for dyed fuel in the equipment.

The state fuel tax rate is \$.2975 per gallon.

Complete this form and attach payment for the amount of tax due. Form may be emailed to mdtcontractor@mt.gov. Payment may be made by credit card.

Company Name:	Date:
Address:  City: State: Zip Code:	Phone Number:
City: State: Zip Code:	
Summary:	
Number of gallons of dyed diesel in equipment.  (Gallons from equipment listed on Schedule 1 on back automatic	cally calculated)
2. Calculate your payment. (Multiply Line 1 by .2975 automatically calculated)	
Sign below and remit to: Montana Department of Transporta Fiscal Operations Bureau PO Box 5895 Helena, MT 59604-5895	ation
I declare, under penalties of perjury, that this remittance form my knowledge and belief is true, correct and complete.	has been examined by me and to the best of
Signature of Authorized Agent	Title Date
<u>-</u>	

By cooperative agreement, the Montana Department of Transportation exchanges fuel tax information with other tax collecting agencies.

Alternate accessible formats of this document will be provided up on request.



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## Schedule 1

Project	Description of Equipment Containing Dyed Special Fuel	Gallons
Total Callena of D	had Special Fuel in Equipment (Enter on Line 4 of Form)	
i otal Gallons of D	byed Special Fuel in Equipment (Enter on Line 1 of Form)	