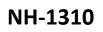


Revenue Administration



## **REQUEST FOR REFUND DUE FOR A DECEASED TAXPAYER**

PRINT OR TYPE	MMDDYYYY	M	MMDDYYYY	
Tax Period Begin Date:		Tax Period End Date:		
Name of Decedent		Date of Death (MMDDYYYY) Taxpayer Identification Number		
Number & Street Address (Permanent or Domicile on the date of death)		City / Town State Zip Code + 4 (or Canadian Postal Code)		Canadian Postal Code)
Name of Claimant		Claimant Number & Street Address		
City / Town Sta	Zip Code + 4 (or Canad	Jian Postal Code)		
A. Surviving spouse, claiming a refund b B. Administrator or executor. Attach a c <u>Signature and Verification</u> I hereby make request for refund of taxes over best of my knowledge and belief, it is true, corr	court certificate showing your	appointment.	es of perjury, that I have exam	nined this claim and to the
Signature (in ink) of Claimant			Date	
	INS	TRUCTIONS		
WHO MUST FILE If you are claiming a refund on behalf of a dece	ased taxpayer, you must file F	orm NH-1310.		
WHERE TO FILE Mail forms to the New Hampshire Department Taxpayer Services Division PO Box 3306 Concord, NH 03302-3306	of Revenue Administration			

FORMS SHALL NOT BE FILED BY FAX OR EMAIL

## LINE A

Check the box on Line A if you are a surviving spouse filing a joint return but requesting a refund in your name only, or if you received a joint refund check but are requesting a new check in your name only. For either request, you must include a copy of the death certificate with a completed Form NH-1310. If you are requesting a new check in your name only, you must also return the joint refund check with Form NH-1310.

## LINE B

Check the box on Line B only if you are the decedent's court-appointed administrator or executor. You must include a copy of the court certificate showing your appointment with the completed Form NH-1310. A copy of the decedent's will cannot be accepted as evidence that you are the personal representative.

## NEED HELP?

Call the Department of Revenue Administration, Taxpayer Services Division at (603) 230-5920. Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964.

