

Indiana Department of Revenue Claim for Refund

☐ POA-1 form Included Name of Taxpayer Taxpayer Identification Number (include 3 digit location) Address Federal Identification Number ZIP City State Social Security Number Indicate only one tax type from one of the following sections: Section A - The GA110L is not to be used for Withholding, Individual, or Corporate Income tax. See instructions. ☐ Food & Beverage ☐ Motor Vehicle Rental ☐ Sales & Use (Not Fuel Related) ☐ VSE-103 ☐ County Innkeepers ☐ Sales & Use (Utilities) ☐ Collection Fees/Penalty ☐ HRT-103 ☐ Other Section B ☐ Oil Inspection Fee ☐ Aviation Fuel Excise ☐ Gasoline Use ☐ Sales (Diesel) ☐ Other Fuel Related ☐ Surcharge (Special Fuel - see instructions) **Section C** ☐ Aeronautics ☐ Cigarette Excise ☐ Alcohol Excise ☐ Other Tobacco Products Excise Section D BAS ☐ IFTA ☐ IRP/BPR ☐ Motor Carrier Fuel Tax ☐ Oversize/Overweight ☐ UCR Provide the explanation as to why a refund is due: Requested Refund Year or Period Ending Requested Refund Date(s) of Tax Year or Period Ending Date(s) of Tax Payment(s) (mm/dd/yyyy) Amount (mm/dd/yyyy) Amount Payment(s) I hereby certify that the foregoing account is just and correct; that the amount claimed is legally due, after allowing all just credits; and that no part of the same has been paid. I further understand that this refund may be applied to any liability which I currently have outstanding. Under penalties of perjury, I declare that I have examined this form, including the accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Sign Form GA-110L and include evidence to support your claim. Failure to attach ALL documentation with your claim may result in your claim being rejected or denied. Printed Name: Title: Signature: _ Daytime Phone Number: _____ Email: _____ _____ Date: ____ For Department Use Only Tax Analyst/Auditor: _____ Date: _____ Supervisor: _____ Date: _____ Claim Number: Year Interest Interest Total Total DLN Paid Paid Interest Refund From To Amount **Amount**

Instructions for Completing Form GA-110L

Complete a separate Form GA-110L for each tax type and location. Fill-in all blanks as any missing or incomplete information may delay the processing of your Claim for Refund or may cause the Claim for Refund to be rejected or denied. Make sure any and all returns have been filed.

Note: Claim for Refund (Form GA-110L) can be completed electronically via the Indiana Department of Revenue's (DOR) secure e-service portal, the Indiana Taxpayer Information Management Engine (INTIME), at intime.dor.in.gov.

As of Dec. 1, 2020, DOR no longer accepts any removable media to include CDs, DVDs, or USB flash drives from customers needing to submit documents. Any media received in this manner will be returned or destroyed. Customers should use INTIME to submit data and documents in a secure, quick, and efficient manner.

DOR will not accept protective claims submitted at the end of the calendar year. All supporting documentation must be submitted with the GA-110L claim

- Include the taxpayer's name, address, and correct Taxpayer Identification Number (TIN) with location number that was assigned by the state for your specific location.
- Check only ONE Tax Type.
 - o Each tax type requires a separate GA-110L.
 - o Refunds of the Surcharge tax are available to non-motor carriers who purchased special fuel (diesel, biodiesel, compressed natural gas or liquified natural gas) in Indiana from July 1, 2017 through June 30, 2018. The vehicle make, model and Vehicle Identification Number (VIN) must be included, along with purchase receipts.
 - o This form is **not** to be used for Withholding, Individual, or Corporate Income tax. Refunds for these tax types must be requested with the appropriate amended return. All amended WH-3's must include corrected wage statements as well.
- Include a complete explanation of why the refund is due. Attach ALL evidence to support your claim. Examples are not all inclusive: invoices showing tax paid; copy of exemption certificate if it is an exempt customer; purchase agreement and contract for items such as software and warranties; proof of payment (credit invoice or canceled checks); utility bills showing meter number; use tax journal and any additional documentation to support your claim. Failure to attach ALL documentation with your claim may result in your claim being rejected or denied.
 Do not use removable media (CDs, DVDs, or USB flash drives) to submit documents. Any media received in this manner will be returned or destroyed.
- For a refund claim to be valid, a refund amount must be a request for the amount legally due for a specific tax period. Refund claim amounts must be separately stated by period or tax year. Include each requested refund amount for the appropriate period(s).
- Be sure to sign the GA-110L form and include a daytime phone number and email address. The form must be signed to be a valid refund claim. **Including a correct email address will help expedite the refund process**.
- Complete and attach a Power of Attorney (POA-1) form authorizing DOR to discuss your claim and specific tax type with someone other than
 the taxpayer. An electronic POA (ePOA) can be completed via DOR's secure e-service portal INTIME at intime.dor.in.gov.

Allow 60 days for processing before contacting DOR regarding the status of your claim.

For a refund to be valid, it must include:

- the refund amount;
- 2. the tax period for which the refund is due;
- 3. the reason for the refund;
- 4. the taxpayer's signature; and
- 5. all required supporting documentation

If your claim does not include these items, it will be rejected or denied.

Mailing/Contact Information

Please use the information below based on the tax type selected.

Section A	Section B	Section C	Section D
Indiana Dept. of Revenue			
P.O. Box 935	P.O. Box 1971	P.O. Box 901	P.O. Box 6075
Indianapolis, IN 46206-0935	Indianapolis, IN 46206-1971	Indianapolis, IN 46206-0901	Indianapolis, IN 46206-6075
(317) 232-2240	(317) 615-2630	(317) 615-2710	(317) 615-7200
	fetax@dor.in.gov	excisetax@dor.in.gov	IndianaMotorFuel@dor.in.gov