

**CITY OF TUSCALOOSA
PETITION FOR REFUND**

The undersigned hereby makes application for refund of

Dollars, _____ tax paid by said undersigned
to _____ for the period

_____ which amount was erroneously paid, or paid
in excess of the amount due, or was paid through mistake of fact or law.

Explain in detail the reasons for refund claim. (Attach additional pages if necessary.)

Notarized Signatures: Petition must bear notarized signature of the seller. If a petitioner is an individual, the individual must sign. If a petitioner is a partnership, a partner must sign. All signatures must be notarized and bear the notary seal.

Company Name (Seller)

Account No.

Mailing Address

Telephone No.

City State Zip

Petitioner's Name (Please print)

Petitioner's Signature/Title

Petitioner's Name (Please print)

Petitioner's Signature/Title

Sworn to and subscribed before me this _____ day of _____, 2000.
