

MnDOT Office of Aeronautics

DEPARTMENT OF TRANSPORTATION APPLICATION FOR REFUND OF TAX

Phone: 651-234-7201

Mail Completed form to: MnDOT, Office of Aeronautics, 395 John Ireland Blyd, MS 410, St Paul, MN 55155-1800

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Make of Aircraft:	N Number:
This aircraft was permanently destroyed on	This aircraft was sold out of state on:
, 20, and will not again be	, 20,
=	, 20,
operated in this state.	TO:
Cause of destruction:	(Name)
	(Mane)
Where is wreckage now?	(Address)
	(City, State, Zip)
State present condition of aircraft and plans for its	
disposal:	
I hereby apply for refund of the portion of the tax paid on this aircraft in accordance with the provisions of Minnesota Laws 1969, Section 360.62 to 360.67. I hereby certify that I am (or was) the owner of the aircraft described herein and that the statements made herein are true and correct.	
NOTICE	
The state registration certificate for this aircraft must	Name:
be submitted with this application for refund, if	
available. If not available, state why.	Signature:
•	
	Address:
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EOD DEDADTMENTAL LICE ONLY	
FOR DEPARTMENTAL USE ONLY	VEAD. MODEL.
MAKE OF AIRCRAFT:	YEAK: MODEL:
	4. 4. 5. 5. 5. 7. 7. T. A.
ANNUAL TAX \$ REFUND OF _	% AMOUNT \$
1.DDD 0.11DD D.1.	
ADDDOVED DV:	DITED DV.