Michigan Department of Treasury
3891 (Rev. 08-13)

Refund Request for Prepaid Sales Tax on Fuel

This form is issued under the authority of the Sales Tax Act, P.A. 167 of 1933. Filing is voluntary.

Account Number	Registered Business Name		
Address	City	State	ZIP Code

OVERPAYMENT DETAIL

Tax Reporting Period	Amount Overpaid
TOTAL OVERPAYMENT	

CERTIFICATION

I certify under penalty of perjury that I have examined this request and to the best of my knowledge and belief, it is true and correct.

Authorized Signature	Telephone Number
Name and Title Printed	Date

Mail this form to:
Michigan Department of Treasury,
P.O. Box 30427,
Lansing, Michigan 48909.

For questions, call (517) 636-6925.