



Madison County Sales Tax Department

KEVIN CAPUTO
Director

Mailing Address:
100 North Side Square
Huntsville, AL 35801

Physical Address:
819 Cook Avenue
Huntsville, AL 35801

Phone (256) 532-3498 – Fax (256) 532-3760

www.madisoncountyal.gov

Petition For Refund

The undersigned hereby makes application for refund of _____ Dollars, (\$_____) _____ tax/fee paid by said undersigned to the Madison County Sales Tax Department for the period(s) _____, 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):

Documentation: The petition must be documented and you must attach invoices, receipts and other documentation sufficient to justify the issuance of a refund.

Signatures: If a petitioner is an individual, the individual must sign. If a petitioner is a partnership, a partner must sign. If a petitioner is a corporation an officer of the corporation must sign.

Petitioner's Name (Seller) Account Number FEIN/SSN

Doing Business As (If Applicable) Telephone Number

Petitioner's Signature *Please See Note Below Print Petitioner's Name Petitioner's Title

Mailing Address

City State Zip Code

***NOTE: Must be signed by an Officer, Owner, Partner, or Legal Representative.**