



**STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION
DIVISION OF TAXATION
EXCISE TAX SECTION
ONE CAPITOL HILL, PROVIDENCE, RI 02908-5800**

**UNIFORM OIL RESPONSE AND PREVENTION FEE
MONTHLY RETURN**

FOR THE MONTH OF _____ 20 ____

FEI # _____
DISTRIBUTOR # _____

NAME _____
MAILING ADDRESS _____
CITY/TOWN, STATE ZIPCODE _____

INSTRUCTIONS

REQUIREMENT TO FILE - Pursuant to Section 46-12.7-4.1 of the R.I.G.L., every person, partnership, corporation, etc. owning petroleum products at the time the petroleum products are received at a marine terminal within this State, by means of a vessel from a point of origin outside this State, must file a return.

FILING DATE - This return is to be filed with the Rhode Island Division of Taxation on or before the 30th day of each month based upon the number of barrels of petroleum products received during the previous month.

Payment must accompany the return.

COMPUTATION OF AMOUNT DUE - On **Schedule A-1** list each receipt or delivery of petroleum product subject to the fee. Enter the total. On **Schedule A** (below) Lines 1 through 10, enter the number of barrels of each petroleum product received at a marine terminal within this State during the calendar month. Enter the total on Line 11 and multiply by .05 (rate of five cents per barrel). This total should agree with the total on Schedule A-1. Enter the total fee due on Line 12.

TERMINAL OWNER/OPERATOR INFORMATION - Every terminal owner/operator must complete Schedule B detailing the receipt of petroleum products at its marine terminal within this State.

SCHEDULE A - FEE COMPUTATION

<u>PETROLEUM PRODUCT</u>	<u># OF BARRELS RECEIVED</u>
1. GASOLINE	1 _____
2. DIESEL	2 _____
3. #2 FUEL OIL	3 _____
4. #4 AND #6 FUEL OIL	4 _____
5. KEROSENE	5 _____
6. AVIATION JET FUEL	6 _____
7. AVIATION GAS	7 _____
8. LPG	8 _____
9. ETHANOL	9 _____
10. OTHER _____	10 _____
11. TOTAL BARRELS _____	
RATE .05	
12. TOTAL FEE DUE <u>_____</u>	

CERTIFICATION

The undersigned _____, hereby certifies that
NAME TITLE
 he/she is properly authorized to sign this return, that he/she has personal knowledge of the figures and that this return and the information herein contained is true. The undersigned also hereby declares that this return is made under the penalty of perjury.

SIGNATURE DATE

