In addition to the *Form 637 General Questionnaire*, please answer the following questions specific to this activity. **(Attach additional sheets, if needed.)**

# “QR” QUESTIONNAIRE

**Activity Letter QR** - Qualified retailer of diesel fuel or kerosene sold in Alaska for nontaxable uses.

Treas. Reg. 48.4082-5(b) provides a special rule relating to diesel fuel and kerosene taxes in Alaska. This rule applies to diesel fuel or kerosene removed, entered, or sold in Alaska for ultimate sale or use in an exempt area of Alaska. This rule, generally allows a qualified dealer to buy undyed diesel fuel and undyed kerosene tax-free for resale.

1. Does your business qualify for the Form 637 “QR” Registration?  Yes  No
   * **If yes**, please complete questions below and return this form.
   * **If no**, please sign the statement below, date, and return this form.

I request my Form 637 “QR” Registration be denied or revoked as I am no longer engaged in this activity.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

**Note:** This request must be signed by a person with authority to bind the applicant or registrant. Refer to *Form 637, Application for Registration (For Certain Excise Tax Activities), General Instructions*, under the *Signature* section for additional guidance.

1. Is your business now using, and does your business plan to continue using, your business’s registration to make tax-free transactions? Yes  No
2. Does your business have a Qualified Dealer’s License issued by the State of Alaska?

Yes  No

**If yes**, please provide the number.

1. Does your business file a Form 720, Quarterly Federal Excise Tax Return?

Yes  No

**If no**, please explain why.

1. Does your business purchase any tax-paid diesel or kerosene?

Yes  No

**If yes**, please describe the nature of these purchases.

1. List the average monthly volume of fuel your business sells.

|  |  |
| --- | --- |
| Product | Average Monthly Volume (gallons) |
| Diesel Fuel |  |
| Gasoline |  |
| Kerosene |  |
| Jet Fuel |  |
| Aviation Gasoline |  |
|  |  |
|  |  |

1. List the name and address of your business’s supplier(s).
2. Please describe your business’s fuel storage facilities, including the type of fuel stored and the storage capacity of each fuel tank.
3. Has your business name, address, or employer identification number changed from that shown on your business validated registration?

Yes  No

**If yes**, please provide the correct information.

1. List all addresses of current business operations (include out-of-state or foreign operations, if applicable).

1. List the address where your business’s books and records are kept.

1. For tax free sales of diesel or kerosene, please describe how your business will determine that the fuel will be used for a nontaxable use and what records your business will keep supporting your business determination.
2. List the name and phone number of a person whom we can contact about this registration.