



Florida Department of Revenue
Application for Refund - Sales and Use Tax

DR-26S
 R. 01/27 04/24
 Rule 12-26.008, F.A.C.
 Effective 01/27 04/24
 Page 1 of 2

Section 1: Taxpayer Information

Taxpayer Name:		Sales Tax Certificate Number:	
Business Partner Number:	Federal Employer Identification Number (FEIN):	Social Security Number (SSN)*:	
Mailing Street Address:			
Mailing City:	State:	ZIP:	
Location Street Address:			
Location City:	State:	ZIP:	
Telephone Number (include area code):	Fax Number (include area code):	Email Address (optional):	

Section 2: Taxpayer Representative - This section is to be completed when a taxpayer representative is requesting the refund. A signed *Florida Department of Revenue Power of Attorney and Declaration of Representative* (Form DR-835) must be attached.

Representative Name:		
Street or Mailing Address:		
City:	State:	ZIP:
Telephone Number:	Fax Number:	Email Address (optional):

Section 3: Collection or Reporting Period(s) - Enter the date the tax was paid and the collection or reporting period(s).

Date Paid (MM/DD/YY):	Collection or Reporting Dates (MM/DD/YY to MM/DD/YY):
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Section 4: Tax Categories - Check the box next to the type of tax you paid.
 A separate application must be completed for each fee or tax type.

☐ Amusement Machine Certificate Fee	☐ Solid Waste Fees	☐ Transient Rental Tax Paid to the Department
☐ Discretionary Sales Surtax	☐ Battery Fees	☐ Other (Please specify):
☐ Sales and Use Tax	☐ New Tire Fees	
	☐ Rental Car Surcharge	
	☐ Gross Receipts Tax on Dry Cleaning	

Check the box next to the reason for your refund claim.

- | | | | |
|--|--|--|---|
| ☐ Amended Replacement Return | ☐ Credit Memos | ☐ FL Rural Areas of Opportunity | ☐ Public Works - Universities and Colleges |
| ☐ Audit Overpayment | ☐ Duplicate Payment | ☐ Home Hardening Products | ☐ Real Property Lease |
| ☐ Bad Debt | ☐ Estimated Tax | ☐ New/Existing Business Equipment | ☐ Repossessed Merchandise |
| ☐ Building Materials Used in Construction of Affordable Housing Units | ☐ Exempt Sales | ☐ Motor Vehicles/Boat/Mobile Homes/Aircraft | ☐ Transient Rental |
| ☐ Community Contribution Tax Credit | ☐ Florida Neighborhood Revitalization | ☐ Motor Vehicle Repurchase/Replacement | ☐ Other (Please specify):
<div style="border: 1px solid black; height: 20px; width: 100%;"></div> |

Section 5: Refund Amount - Enter the refund amount. Provide a brief explanation for the refund claim.

Refund Amount:	Brief Explanation for Refund:
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*Social security numbers (SSNs) are used by the Florida Department of Revenue as unique identifiers for the administration of Florida's taxes. SSNs obtained for tax administration purposes are confidential under sections 213.053 and 119.071, Florida Statutes, and not subject to disclosure as public records. Collection of your SSN is authorized under state and federal law. Visit the Department's website at floridarevenue.com/privacy for more information regarding the state and federal law governing the collection, use, or release of SSNs, including authorized exceptions.

Authorization and Signature

Under penalties of perjury, I declare that I have read the foregoing application and the facts in it are true.

Taxpayer Signature

Date

OR

Representative Signature

Date

Mail this application and applicable documentation to:

Refunds
Florida Department of Revenue
PO Box 6490
Tallahassee FL 32314-6490

OR
Fax **(850)850-410-2526**

For more information about the documentation needed to process your refund, or to check on the application status, call Refunds at **(850)850-617-8585**.

Contact Us

Information and tutorials are available at floridarevenue.com/taxes/education.

Tax forms and brochures are available at floridarevenue.com/forms.

To speak with a Department of Revenue representative, call Taxpayer Services at **(850)850-488-6800**, Monday through Friday, excluding holidays. **For a written reply to tax questions, email Taxpayer Services at fdortaxpayerservices@floridarevenue.com.**

Subscribe to Receive Email Alerts from the Department

Subscribe to receive an email for filing due date reminders, Tax Information Publications (TIPs), or proposed rules. Subscribe today at floridarevenue.com/dor/subscribe.

Reference

The following document was mentioned in this form and is incorporated by reference in the rule indicated below.

The form is available online at floridarevenue.com/forms.

Form DR-835

Florida Department of Revenue Power of Attorney and Declaration of Representative

Rule 12-6.0015, F.A.C.