

Sales, Fuel & Special Tax Division
 Maine Revenue Services
 Augusta, ME 04332-1060

USE TAX CERTIFICATE

PLEASE READ THE FOLLOWING BEFORE COMPLETING THIS RETURN: THIS TAX RETURN WILL BE AUDITED.
 YOU ARE REQUIRED TO COMPLETE THIS USE TAX RETURN IN ACCORDANCE WITH THE MAINE SALES AND USE TAX LAW. FAILURE TO REPORT ALL THE TAX DUE WILL RESULT IN YOUR BEING ASSESSED FOR TAX, PLUS INTEREST AND PENALTY CHARGES.
 INSTRUCTIONS ARE PROVIDED ON THE REVERSE. IF YOU NEED ASSISTANCE, CONTACT MAINE REVENUE SERVICES AT (207) 624-9693.

VEHICLE PURCHASED				VEHICLE TRADED-IN (see reverse)		
Kind of Vehicle	Watercraft			Kind of Vehicle (see "Allowance for trade-in" on reverse)		
	Length	HP				
Make	Model	Year		Make	Model	Year
Vin/Serial Number (last 8 digits)				Vin/Serial Number (last 8 digits)		

Seller's Name _____ Date of Transfer _____

Seller's Address _____

1. Full purchase price of vehicle (see instructions on back)	\$
2. Allowance for trade-in; enter amount only if it meets all the conditions explained on reverse	\$
3. Net amount subject to tax (line 1 minus line 2)	\$
4. Use tax due (multiply line 3 by the applicable rate, subtract any amount shown in C on reverse)	\$
5. Exempt Purchase - Please enter exemption type (see instructions on back) <input type="checkbox"/>	

Name under which vehicle is registered, if different from purchaser _____

Lienholder Name _____ Address _____

I hereby authorize the lienholder and/or seller to disclose to Maine Revenue Services any information necessary to verify the purchase price of the above vehicle. I also authorize Maine Revenue Services to furnish a copy of this certificate to the lienholder and/or seller as my consent to disclose such information. I certify under the pains and penalty of perjury that the statements above are true, accurate and complete. Failure to truthfully report any information required on this form is a crime.

Purchaser _____
 Please Print First Name Last Name Social Security Number Signature

Purchaser's Address _____
 Street or Box No. City or Town State Zip

REGISTRATION OFFICE WILL INDICATE REGISTRATION NO.		DO NOT WRITE IN THIS SPACE (For Use of Tax Collectors Only)	
Date	Date Paid	Amount of Tax Paid	

Please place validation stamp here: