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| **Uwaga! Pełna funkcjonalność formularza i powiadomienie o aktualizacji po WŁĄCZENIU MAKR. Jak to zrobić www.iform.pl/makra** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | Potwierdzenie przyjęcia wniosku przez urząd gminy lub miasta (pieczęć) | | | | | | | | | | | | | | | | | | | |
| **WNIOSEK o zwrot podatku akcyzowego zawartego w cenie oleju**  **napędowego wykorzystywanego do produkcji rolnej** | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | |
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| **na rok** | | | | | |  | | | | | | | **luty**  \* **sierpień**  \*\* | | | | | | | | | | | | |  | |  | | | | | | | |  | | | | | | | | |  | | |
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| Podstawa prawna: | | | | | | | | ustawa *z* dnia 10 marca 2006 r. o zwrocie podatku akcyzowego zawartego w cenie oleju napędowego wykorzystywanego | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | do produkcji rolnej (Dz. U. Nr 52, poz. 379, z późn. zm.). | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Termin składania wniosku: | | | | | | | | od dnia 1 lutego do ostatniego dnia lutego; od dnia 1 sierpnia do dnia 31 sierpnia. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Miejsce składania wniosku: | | | | | | | | wójt, burmistrz (prezydent miasta) właściwy ze względu na miejsce położenia gruntów będących w posiadaniu lub | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | współposiadaniu producenta rolnego. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **I. MIEJSCE SKŁADANIA WNIOSKU** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *01. Wójt, burmistrz (prezydent miasta), do którego jest składany wniosek* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **II. DANE IDENTYFIKACYJNE WNIOSKODAWCY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | *02. Nazwisko/Nazwa pełna* | | | | | | | | | | | | | | | |  | | *05. NIP \*\*\** | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | |  | | | | | | | | | | | | | | | |  | | *07. Numer dowodu osobistego \*\*\*\** | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | |  | | | | | | | | | | | | | | | |  | | *07a. Wydany przez* | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | | *03. Pierwsze imię/Nazwa skrócona* | | | | | | | | | *04. Drugie imię* | | | | | | |  | | *08. Inny dokument potwierdzający tożsamość (rodzaj, numer dokumentu)\*\*\*\** | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **III. MIEJSCE ZAMIESZKANIA I ADRES / SIEDZIBA I ADRES PRODUCENTA ROLNEGO** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *10. Państwo* | | | | | | | | | | | *11. Województwo* | | | | | | | | | | *12. Powiat* | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | *13. Gmina* | | | | | | | | | | | *14. Ulica* | | | | | | | | | | *15. Nr domu* | | | | | | | | | | | | | | | | | *16. Nr lokalu* | | | | | | | |  |
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|  | *17. Miejscowość* | | | | | | | | | | | *18. Kod pocztowy* | | | | | | | | | | *19. Poczta* | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **IV. OŚWIADCZENIE O POWIERZCHNI UŻYTKÓW ROLNYCH** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Oświadczam, że jestem posiadaczem użytków rolnych o powierzchni | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | ha | | | | |  | | | | | | | a, | | | | | |
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| współposiadaczem użytków rolnych o powierzchni | | | | | | | | | | | | | | | |  | | | ha | | | | | |  | | | | | | | a określonej w ewidencji | | | | | | | | | | | | | | | |
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| gruntów i budynków wg stanu na dzień 1 lutego | | | | | | | | | | | | | | |  | | roku, wykorzystywanych do produkcji rolnej, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| położonych na obszarze gminy | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |
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| **V. INFORMACJA O ZAŁĄCZNIKACH** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *20. Liczba załączników \*\*\*\*\** | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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*\* Zaznaczyć w przypadku wniosku o zwrot podatku za okres od dnia 1 sierpnia do dnia 31 stycznia.*

*\*\* Zaznaczyć w przypadku wniosku o zwrot podatku za okres od dnia 1 lutego do dnia 31 lipca.*

*\*\*\* Podają te podmioty, które są obowiązane posiadać NIP na podstawie przepisów ustawy z dnia 13 października 1995 r.  
 o zasadach ewidencji i identyfikacji podatników i płatników (Dz.U. z 2012 r. poz. 1314 oraz z 2013 r. poz. 2).*

*\*\*\*\* Podać numer PESEL albo numer dowodu osobistego albo rodzaj i numer innego dokumentu potwierdzającego tożsamość.*

*\*\*\*\*\* Podać liczbę faktur VAT albo ich kopii.*

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| *21. Załączniki* Nazwa załączników Liczba załączników | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **VI. Proszę o wypłacenie zwrotu podatku w gotówce** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Proszę o przekazanie zwrotu podatku na rachunek bankowy** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **VII. NUMER RACHUNKU BANKOWEGO (w przypadku przelewu zwrotu podatku na rachunek bankowy)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *22. Nazwisko, imię/nazwa oraz adres posiadacza rachunku* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *23. Nazwa pełna banku* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *24. Pełny numer rachunku bankowego* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **VIII. ZGODA WSPÓŁPOSIADACZY NA WYPŁATĘ ZWROTU PODATKU \*\*\*\*\*\*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | 1) | | |  | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | | | | | | |  |
|  |  | | | (imię i nazwisko) | | | | | | | | | | | | | | | | | |  | | | | (data i podpis) | | | | | | | | |  | | | | | | | | | | | | |  |
|  | 2) | | |  | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | | | | | | |  |
|  |  | | | (imię i nazwisko) | | | | | | | | | | | | | | | | | |  | | | | (data i podpis) | | | | | | | | |  | | | | | | | | | | | | |  |
|  | 3) | | |  | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | | | | | | |  |
|  |  | | | (imię i nazwisko) | | | | | | | | | | | | | | | | | |  | | | | (data i podpis) | | | | | | | | |  | | | | | | | | | | | | |  |
|  | 4) | | |  | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | | | | | | |  |
|  |  | | | (imię i nazwisko) | | | | | | | | | | | | | | | | | |  | | | | (data i podpis) | | | | | | | | |  | | | | | | | | | | | | |  |
|  | 5) | | |  | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | | | | | | |  |
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|  | 6) | | |  | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | |  | | | | | | | | | | | | |  |
|  |  | | | (imię i nazwisko) | | | | | | | | | | | | | | | | | |  | | | | (data i podpis) | | | | | | | | |  | | | | | | | | | | | | |  |
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| **IX. OŚWIADCZENIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | Oświadczam, że:   1. znane mi są skutki składania fałszywych oświadczeń wynikające z art. 297 § 1 Kodeksu karnego; 2. znane mi są zasady przyznawania zwrotu podatku akcyzowego zawartego w cenie oleju napędowego wykorzystywanego do produkcji rolnej. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | *25. Data i podpis wnioskodawcy* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | data wypełnienia wniosku (dzień – miesiąc – rok) | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | |  | | |  |
|  |  | | | | | | | | | | | | | | | | | | | czytelny podpis wnioskodawcy | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| **X. ADNOTACJE URZĘDU GMINY/MIASTA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *26. Uwagi* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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*\*\*\*\*\*\* Wypełnić w przypadku, gdy grunty gospodarstwa rolnego stanowią przedmiot współposiadania (nie dotyczy współmałżonków).*