

Residential Form Alternative Fuel Vehicle Conversion and Infrastructure Credits

A. Personal information

First name _____ M.I. _____ Last name _____ Taxpayer identification number (TIN) _____
 Telephone Number _____ Email Address _____

B. Alternative fuel vehicle (AFV) charging or fuel storage dispensing station- Private residence

Equipment Manufacturer _____ Invoice Number _____
(B1) Equipment Cost _____ **(B2)** Labor Cost _____ **(B3)** Total Cost **(B1 + B2)** _____ **(B4)** Multiply **B3** by 0.50 _____ **(B5)** Credit amount (not to exceed \$1,000 per station or **B4**) _____

Private residence address _____ Suite/Apt/Bldg _____
 City _____ State _____ Zip code _____

C. Alternative fuel vehicle (AFV) charging or fuel storage dispensing station- Public use

Equipment Manufacturer _____ Invoice Number _____
(C1) Equipment Cost _____ **(C2)** Labor Cost _____ **(C3)** Total Cost **(C1 + C2)** _____ **(C4)** Multiply **C3** by 0.50 _____ **(C5)** Credit amount (not to exceed \$10,000 per station or **C4**) _____

Installation address (no PO Boxes) _____ Suite/Apt/Bldg _____
 City _____ State _____ Zip code _____
 Access _____ Hours of operation _____ Accepted payment methods _____

D. Alternative fuel vehicle (AFV) - Conversion

AFV Manufacturer _____ AFV Model _____
(D1) Equipment Cost _____ **(D2)** Labor Cost _____ **(D3)** Total Cost **(D1 + D2)** _____ **(D4)** Multiply **D3** by 0.50 _____ **(D5)** Credit amount (not to exceed \$19,000 per station or **D4**) _____

Retain your original documents. Attach photocopies of the following document(s) to this form. Failure to do so will result in any credit claim denials. The credit claimed in any one tax year cannot exceed the income tax liability.

1. A paid invoice, receipt or equivalent proof of payment for modifying the existing petroleum derived gasoline or diesel fuel vehicle
2. A paid invoice, receipt or equivalent proof of payment for purchases and installation of qualified alternative fuel storage and dispensing or charging equipment
3. An electrical permit

Signature I solemnly affirm under penalties of law, that to the best of my knowledge, the information that is the subject of this form is in accordance with all applicable laws, regulations and permitting requirements and is operational, that there are no false statements on this form or other materials submitted to the District of Columbia (DC), Office of Tax and Revenue, and that no false statements have been made in order to influence any action by DC on this form.

Print name _____ Date signed _____

Signature _____