

City of Rock Island
Finance Department
1528 3rd Avenue
Rock Island IL 61201-8678

Motor Fuel Tax Form (Retail Only)

Effective as of February 1, 2019

(Ordinance No. 075-2018, December 17, 2018)

Step 1:

For the period: _____ / _____ . IBT no. _____ - _____ .
Month Year (8 digit - Illinois Business Tax Number)

Name of Business: _____
Address: _____
City, State, ZIP _____

Daytime Phone No. (_____) _____ - _____ .

Step 2:

1. Total number of gallons sold **(from Dept. of Revenue submitted return)**
2. City's imposed tax rate of \$0.05 per gallon (multiply line 1 x .05)
3. Late payment penalty of 5% per mo. (multiply line 2 x .05)
4. Total tax amount due (Add lines 2 and 3)
(Make check payable to : **City of Rock Island - Finance Dept**)

_____	_____
_____	_____
_____	_____
_____	_____

Step 3:

Attached copies of the ST-1 and ST-1 worksheet forms or other form(s) submitted to the Illinois Department of Revenue which show number of gallons sold.

Step 4:

I certify that the information submitted above is a true and complete record to the best of my knowledge and is taken from the books and records of the business for which the return is filed to the Illinois Department of Revenue.

Signature: _____

Title: _____

Date: _____

Step 5:

Please send this form, and payment with attached documentation, to address stated on top of this form.

If you have any questions, please call the City of Rock Island Finance Department at (309) 732-2115.