



**MOTOR FUELS TAX REFUND BOND**  
**(City and Suburban Bus, Nonprofit Bus, Senior Citizen  
Transportation, or Taxicabs)**

Surety Bond No. \_\_\_\_\_

Permit No. \_\_\_\_\_

KNOW ALL MEN BY THESE PRESENTS, that we, \_\_\_\_\_, of  
Name of Principal

\_\_\_\_\_, County \_\_\_\_\_, State of \_\_\_\_\_,  
Street Number and Name Name of City or Town

as principal, and \_\_\_\_\_ of \_\_\_\_\_,  
Name of Surety Street Number and Name

\_\_\_\_\_, County \_\_\_\_\_, State of \_\_\_\_\_, ZIP Code \_\_\_\_\_,  
Name of City or Town

as surety, are held and firmly bound unto the Commonwealth of Kentucky in the sum of \_\_\_\_\_  
dollars, for the prompt and faithful compliance with the provisions of Kentucky Revised Statute 138.446, we bind ourselves, our  
heirs, executors, administrators, successors and assigned jointly and severally, firmly by these presents.

The condition of this obligation is such that, whereas, the principal is now engaged in, or is about to engage in, the  
operation of city and suburban buses, nonprofit buses, senior citizen transportation or taxicabs for the transportation of persons,  
and in such operation is entitled to a refund of seven-ninths (7/9) of the tax paid on motor fuel used exclusively in regularly  
scheduled operations, and whereas, the principal from time to time will be making applications to the Commonwealth of Kentucky  
for refund of taxes paid on motor fuel;

NOW THEREFORE, the condition of this obligation is such that, if the above-bonded \_\_\_\_\_  
Name of Principal

shall faithfully comply with the provisions of the aforementioned act and repay to the Commonwealth of Kentucky any refunds  
to which it is not entitled, then this obligation shall be void, otherwise it shall remain in full force and effect. Provided, however,  
this bond can be terminated by the surety upon written notice to the department and principal given by registered mail 60 days in  
advance.

IN WITNESS WHEREOF, we have hereunto set our hands this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Name of Principal

\_\_\_\_\_  
Name of Surety Company

By \_\_\_\_\_  
Owner or President

By \_\_\_\_\_

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Kentucky Resident Agent of Surety Company

Approval \_\_\_\_\_, 20\_\_\_\_\_.

By \_\_\_\_\_  
Supervisor, Motor Fuels Tax Compliance Section