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|  | | | | | | | | | | |  | Potwierdzenie przyjęcia wniosku przez urząd gminy lub miasta  (pieczęć)  ......................................................  (data przyjęcia i podpis) |
| WNIOSEKo zwrot podatku akcyzowego zawartego w cenie oleju napędowego wykorzystywanego do produkcji rolnej | | | | | | | | | | |
| 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: od dnia 1 lutego do ostatniego dnia lutego; od dnia 1sierpnia do 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 kierowany jest wniosek* **WÓJT GMINY WIELKA NIESZAWKA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| II DANE IDENTYFIKACYJNE WNIOSKODAWCY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | *02. Nazwisko / Nazwa pełna* | | | | | | | | | | | | | *05. NIP\*\*\** | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
|  | | |  | | | |  |  |  | |  | |  | |  |  | | |  |  |  |  |  |  | | |
| *06. PESEL\*\*\*\** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *07. Numer dowodu osobistego\*\*\*\** | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *07 a. 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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| 08 a. *Wydany przez* | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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| 09. Numer w Krajowym Rejestrze Sądowym (w przypadku gdy producent rolny podlega wpisowi do tego rejestru )   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| III. MIEJSCE ZAMIESZKANIA I ADRES / SIEDZIBA I ADRES PRODUCENTA ROLNEGO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 10. Państwo | | | | | | | 11. Województwo | | | | | | | | | | | 12. Powiat | | | | | | | | | | | | | | | | | | | | | | |  | |
| 13. Gmina | | | | | | | 14 Ulica | | | | | | | | | | | 15. Nr domu | | | | | | | | | | | | | | 16. Nr lokalu | | | | | | | | |
| 17. Miejscowość | | | | | | | 18. Kod pocztowy | | | | | | | | | | | 19. Poczta | | | | | | | | | | | | | | | | | | | | | | |
| **IV OŚWIADCZENIE O POWIERZCHNI UŻYTKÓW ROLNYCH** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Oświadczam, że jestem posiadaczem użytków rolnych o powierzchni | | | | | | | | | | | | | | | | | | | | |  | | | | | | *ha* | |  | | | *a* | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *współposiadaczem użytków rolnych o powierzchni* | | | | | | | | | | | |  | | | | | *ha* | | |  | | | | | *a określonej w ewidencji gruntów* | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *i budynków wg stanu na dzień 1 lutego* | | | | | | | | | |  |  | |  |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *położonych na obszarze gminy* | | | | | | | | | WIELKA NIESZAWKA | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| 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 1995r. 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 załącznika 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** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | |
| **VII NUMER RACHUNKU BANKOWEGO (w przypadku przelewu zwrotu podatku na rachunek bankowy)**  *22. Nazwisko i imię / nazwa oraz, adres posiadacza rachunku* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *23. Nazwa pełna banku* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *24. Pełny numer rachunku bankowego* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  | |  |  |  |  |  |  |  |  |  |
| **VIII. ZGODA WSPÓŁPOSIADACZY NA WYPŁATĘ ZWROTU PODATKU\*\*\*\*\*\*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| -  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) …............................................................................................................... ….............................................................  (imię i nazwisko) (data i podpis)  6) …............................................................................................................... ….............................................................  (imię i nazwisko) (data i podpis) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **IX. OŚWIADCZENIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **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* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **X. ADNOTACJE URZĘDU GMINY / MIASTA**  *25. Uwagi* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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\*\*\*\*\*\* Wypełnić w przypadku gdy grunty gospodarstwa rolnego stanowią przedmiot współposiadania (nie dotyczy współmałżonków).

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