

State of Rhode Island Division of Taxation
Form UORF-1
 Uniform Oil Response and Prevention Fee



1312199990101

Name			Federal employer identification number		
Address			For the month ending: MM/DD/YYYY		
Address 2			Distributor number		
City, town or post office	State	ZIP code	E-mail address		

Schedule A - Fee Computation

Petroleum Products:	# of Barrels Received	
1 Gasoline.....	1	
2 Diesel.....	2	
3 #2 Fuel Oil.....	3	
4 #4 and #6 Fuel Oil.....	4	
5 Kerosene.....	5	
6 Aviation Jet Fuel.....	6	
7 Aviation Gas.....	7	
8 LPG.....	8	
9 Ethanol.....	9	
10 Other - Enter type:	10	
11 Total Barrels. Add lines 1 through 10.....	11	
12 Total Fee Due. Multiply line 11 by five cents (0.05).....	12	

INSTRUCTIONS

REQUIREMENT TO FILE -

Pursuant to RIGL Section 46-12.7-4.1, every person, partnership, corporation, etc. owning petroleum products at the time the petroleum products are received at a marine terminal within this State, by means of a vessel from a point of origin outside this State, must file a return.

FILING DATE -

This return is to be filed with payment to the Rhode Island Division of Taxation on or before the last day of the following month.

Schedule A: COMPUTATION OF AMOUNT DUE

Lines 1 through 10: Petroleum Products - Enter the number of barrels of each petroleum product received at a marine terminal within this State during the calendar month.

Line 11: Total Barrels - Add lines 1 through 10.

Line 12: Total Fee Due - Multiply line 11 by the rate of five cents (.05). Line 12 should agree with the total on Schedule B.

Schedule B:

List each receipt or delivery of petroleum product subject to the fee. Enter the total in the space provided.

Schedule C: TERMINAL OWNER/OPERATOR INFORMATION

Every terminal owner/operator must complete Schedule C detailing the receipt of petroleum products at its marine terminal within this State.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, it is true, accurate and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Authorized officer signature	Print name	Date	Telephone number
Paid preparer signature	Print name	Date	Telephone number
Paid preparer address	City, town or post office	State	ZIP Code
			PTIN

May the Division of Taxation contact your preparer? YES

Revised 09/2021

Key #26

