SOUTH DAKOTA 3% EXCISE TAX REFUND AFFIDAVIT

____ (Title #) _______ (VIN) _______ (Year/Make)

1. (Name) __________________________________________
   of (address, city, state, zip) _______________________

certify that my reason for requesting a 3% excise tax refund is indicated below; and that I have
attached the required documentation, title correction fee, and original title.

____ (Signature) _______ (Date)

____ Bill of sale was not available or was incomplete at the time of application (bill of sale)

____ Trade-in or purchase price was indicated incorrectly by the dealership (affidavit of
   facts from dealership, corrected purchase agreement)

____ Other ________________________________________

MV:1020 02-98