

	Orthopedic Disability Sales Tax Rebate Claim Louisiana Revised Statute 47:305.69
	Mail to: Office Audit Division Economic Development Unit P. O. Box 66362 Baton Rouge, LA 70896-6362 (225) 219-2270

Please see the back of this form for rebate claim filing information.

Please print or type.

Claimant Information				
Name	Driver's License No.	Social Security Number (Last 4 Digits) XXX-XX- _____		Date of Claim (mm/dd/yyyy)
Mailing Address	City	State	ZIP	Contact Number
Relationship to Orthopedically Disabled Person Self Other (list) _____				
Orthopedically Disabled Person Information				
Name	Driver's License No.	Social Security Number (Last 4 Digits) XXX-XX- _____		Date of Disability (mm/dd/yyyy)
Mailing Address	City	State	ZIP	Contact Number
Description of Disability				
Motor Vehicle Information				
Make	Model	Year	VIN Number	
Description of Modifications Performed				
Purchase Date of Vehicle (mm/dd/yyyy)			Louisiana Sales Tax Paid	

Please attach requested documentation. See the back of the rebate claim form for documentation information

Declaration		
I declare that to the best of my knowledge of all available information, this rebate claim is true and complete and complies with all statutes, rules and regulations, and any other policy pronouncements related to the Orthopedic Disability Rebate program.		
Signature of Claimant	Name (Please Print)	Date (mm/dd/yyyy)
Department of Health and Hospitals Review		
Signature		Date (mm/dd/yyyy)
Printed Name		Printed Title
Louisiana Department of Revenue Approval		
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	Signature	Date (mm/dd/yyyy)
	Printed Name	Printed Title

	<p style="text-align: center;">Orthopedic Disability Sales Tax Rebate Claim</p> <p style="text-align: center;">Louisiana Revised Statute 47:305.69</p> <p>Mail to: Office Audit Division Economic Development Unit P. O. Box 66362 Baton Rouge, LA 70896-6362 (225) 219-2270</p>
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Act 379 of the 2011 Regular Session of the Louisiana Legislature (La. R.S. 47:305.69) provides for a rebate of state sales taxes paid on motor vehicles that have been modified or will be modified for operation by or for the transportation of a person who is permanently orthopedically disabled at the time of purchase. The motor vehicle must be primarily driven by or used for the transportation of such persons. Motor vehicles that are purchased for resale or lease or used for non-personal, business or commercial purposes do not qualify for the rebate program.

In order to qualify, the motor vehicle must have been purchased between January 1, 2010 and June 30, 2013. Qualifying modifications include the installation of such items as a wheelchair lift, hoist, attached ramps, wheelchair hold-down clamps, or special seat restraints. It may also include the alteration of the brake, acceleration or steering systems to facilitate the operation of the vehicle by an orthopedically disabled person. All modifications must be made in accordance with a prescription issued for the orthopedically disabled person by a physician, a licensed chiropractor or by a driver rehabilitation specialist licensed by Louisiana.

The act defines an orthopedically disabled person as a person who has permanent, limited movement of body extremities and loss of physical functions. The physical impairment is such that the person is either unable to operate or be transported in a reasonable manner in a motor vehicle that has not been specially modified.

The following documentation must be attached in order for the rebate claim to be processed:

- Copy of Motor Vehicle Bill of Sale
- Copy of Vehicle Registration Certificate which shows Louisiana state tax paid.
- A letter from the orthopedically disabled person's physician, chiropractor or driver rehabilitation specialist. The letter must contain the following information:
 - Printed name and signature of physician, chiropractor or driver rehabilitation specialist
 - Louisiana medical, chiropractor or driver rehabilitation specialist license number and expiration date
 - Date of disability diagnosis
 - Description of orthopedic disability
- Copy of prescription requiring motor vehicle modifications
- Copies of invoices documenting purchase of vehicle modifications.

The completed Rebate Claim form and the required documentation should be mailed to the Office Audit Division, Economic Development Unit, P.O. Box 66362, Baton Rouge, LA 70896-6362. For questions about your Rebate, please contact the Office Audit Division at (225) 219-2270.

Other questions about the Orthopedically Disability Sales Tax Exemption and its requirements should be sent to Sales. Inquiries@LA.GOV.