Form CT-3911

Taxpayer Statement Regarding State of Connecticut Tax Refund

Use Form CT-3911 to report a missing or stolen Connecticut tax refund that was a direct deposit or issued as a check.

Do not use this form to report a missing debit card. Contact **Chase Customer Service** at **866-586-1705** to report lost, stolen, not received, or damaged debit cards and to request a new card(s).

General Instructions

Complete this form in blue or black ink only.

Attach copies of any correspondence received from DRS concerning this refund to Form CT-3911.

The Department of Revenue Services (DRS) will provide information in writing concerning your refund. If DRS determines that your refund check was cashed, a copy of the cashed check will be mailed to you. If DRS determines that your refund check was not cashed, a stop payment will be placed on the original check and a replacement check will be mailed to you. If you do not receive any information from DRS within six weeks after filing Form CT-3911, contact DRS at **800-382-9463** (Connecticut calls outside the Greater Hartford calling area only) or **860-297-5962** (from anywhere).

Where to File

Mail to:	Department of Revenue Services
	Revenue Accounting Unit
	PO Box 5035
	Hartford CT 06102-5035

Fax to: 860-297-5703

Part I Refund Information

Prior to completing Part I, verify with your bank that the refund has not been deposited.

1.	Type of return filed: Individual Busines	s 🗍 Other				
	Form: Tax period:	Date filed:				
2.	Type of refund requested: 🔲 Direct Deposit 🔲 Check					
	If Direct Deposit, enter your bank information:					
	Bank name:	Account #:				
	If Check, identify if the refund check was:	ver received; or D Lost, stolen or destroyed.				
F	Part II Taxpayer Information					
for		address. For individuals, the TIN is your Social Security Number (SSN); ber or Federal Employer Identification Number (FEIN). Check the box must complete Lines 1, 2, and 3.				
1.`	Your name (or business name)	Enter your TIN and check the appropriate box.				
2. Spouse's name (if joint return)		Spouse's SSN				
3.7	Address (number and street) Apt. no. PO Box City	State ZIP Code Home/cell telephone number				
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Part III Signature

Sign below **exactly** as you signed the original return. For a joint return, **both** you and your spouse must sign. For business returns, the signature must be of the person authorized to sign the check.

Declaration: I declare under penalty of law that I have examined this document and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return or document to DRS is a fine of not more than \$5,000, or imprisonment for not more than five years, or both.

Please sign here.	Your signature	Title (if business return)	Date
	Spouse's signature (if joint return)		Date