



Claim for Refund

Refund to be made payable to and mailed to the address below. If this is different from the name and address on the department records for the accounts number(s) used, provide an explanation and details specific to this refund claim.

Taxpayer name: _____

City account number: _____

Taxpayer DBA (if applicable): _____

Mailing address: _____

Period (month/year – month/year): _____

A list of transactions verifying the amounts in lines 1 through 4 below is required on the table on page 2, and evidence for each sale must be attached.

1. Purchase price: _____

2. Original tax paid: _____

3. Correct tax amount: _____

4. Refund requested: _____

Reason for refund: _____

Acknowledgement

I declare under penalty of perjury, that this claim including attachments is to the best of my knowledge true and correct. I further understand that the claim and documentation may be subject to the City of Steamboat Springs verification process.

Print taxpayer name: _____

Taxpayer signature: _____

Title: _____

Telephone: _____

Date: _____

