FINANCIAL SERVICES DIVISION



SALES TAX ADMINISTRATION

200 Oak Street, Suite 4000 P.O. Box 1190 Fort Collins, CO 80522-1190 (970) 498-5930 FAX (970) 498-5942

PROJECT COST REPORT

Building Permit #:		
Contractor's Name:		
Address:		
City, State, & Zip:		Phone:
Project Location:		
or projects under \$400,000 and not requesti	ng a refund, complete	this section:
By signing, I understand and agree to the formula of the completed project is valued under the cost of the building material used in the refund is due and audit may be requested by Larimer	\$400,000 in the project is materia	
Signature	Title	Date
	+ X .0065	<u>\$</u> \$
If line 2 is greater than line 1, proceed to I	_ine 3 - If line 2 is less	than line 1, proceed to Line 4
3. UNDERPAYMENT OF TAX:		
Line 2	\$	
Line 1 Difference – Additional Tax Due	\$	
	Ψ	
4. OVERPAYMENT OF TAX:	¢	
Line 1 Line 2	\$	
Difference – Refund Due	\$	
Return this completed form along with a copy of documentation support claims for additional Cobillings. Please read Contractor's letter and instructional Project Cost Reports are due 60 after the issue submitted after the 60 days is subject to penaltal, hereby certify, under penalty of perjury, that the correct.	ounty sales tax paid or a structions for examples ance of the CO or letter ty and interest. Reports	a different breakdown on subcontractor's of back up documentation. All Project Cost of Completion. Any Project Cost Report s are subject to audit.
Signature	Title	Date