

**Finance Department - Revenue Office** 8101 Ralston Road P.O. Box 8101 Arvada, CO 80001-8101 Phone (720) 898-7100 Fax (720) 898-7110 www.arvada.org

# **CONSTRUCTION PROJECT COST REPORT USE TAX RECONCILIATION CLAIM FOR REFUND / USE TAX RETURN**

|                             | 1) Legal Name of Business or Individual (Last, First):   |            |           |                         | 7) City Account No. (if applicable): |                     |  |
|-----------------------------|--|------------|-----------|-------------------------|--------------------------------------|---------------------|--|
| Taxpayer Information        | 2) Trade Name of Business (if applicable):   |            |           | 8) Building Permit No.: |                                      |                     |  |
|                             |  |            |           |                         |                                      | 3) Mailing Address: |  |
|                             |  |            |           |                         |                                      |                     |  |
|                             | 4) Cit   | у:         | 5) State: | 6) Zip:                 | 10) Project Street Address:          |                     |  |
|                             |  |            |           |                         |                                      |                     |  |
|                             | 11) Give a brief description of work performed:  |            |           |                         |                                      |                     |  |
| ect                         |  |            |           |                         |                                      |                     |  |
| Project                     |  |            |           |                         |                                      |                     |  |
|                             | <u> </u>   |            |           |                         |                                      |                     |  |
| Tax Computation             | 12) Enter the total cost (less tax) of construction materials used on the project. If Arvada sales tax was paid on any construction materials then copies of invoices are required. (Include costs of materials used by all sub contactors.) |            |           |                         |                                      |                     |  |
|                             |  |            |           |                         |                                      |                     |  |
|                             | 13) Use Tax Due (Multiply line 12 by 3.46%):   |            |           |                         |                                      |                     |  |
|                             | 14) Enter the amount of use tax paid upon issuance of the above listed building permit.  If line 13 equals line 14, no additional use tax collection is due. Sign and submit the report without payment.                                     |            |           |                         |                                      |                     |  |
|                             |  |            |           |                         |                                      |                     |  |
|                             | 15) If line 14 is <i>greater</i> than line 13 enter the difference. This is your overpayment amount. (Include a Job Cost Report as documentation for your refund claim)  |            |           |                         |                                      |                     |  |
|                             | 16) If line 14 is less than line 13 enter the difference. This is the additional use tax due.  |            |           |                         |                                      |                     |  |
|                             |  |            |           |                         |                                      |                     |  |
|                             | 17) Penalty due (10% of line 16):  |            |           |                         |                                      |                     |  |
|                             | 18) Interest Due (1% of line 16 per month):  |            |           |                         |                                      |                     |  |
|                             | 19) TOTAL DUE (total of lines 16 through 18):  |            |           |                         |                                      |                     |  |
| Signature                   | Declaration  I acknowledge that in order to process my overpayment claim, Revenue Staff will need to review records detailing the entire project.  |            |           |                         |                                      |                     |  |
|                             | I declare under penalty of perjury that this claim, including all attachments, is true and correct to the best of my knowledge.  |            |           |                         | 1                                    |                     |  |
|                             |  | <u> </u>   |           |                         |                                      |                     |  |
|                             |  | Signature  |           |                         |                                      | Date                |  |
|                             |  | Print Name |           | Title                   |                                      | Phone No.           |  |
| For City of Arvada Use Only |  |            |           |                         |                                      |                     |  |
| Official Use Only           | Date Received: Refund Requested: \$  |            |           |                         |                                      |                     |  |
|                             |  | Reviewed:  | Date:     | Amount Denied           | : _\$                                | _                   |  |
|                             |  | Approval:  | Date:     | Amount Increased        | : _\$                                | _                   |  |
|                             |  | Comments:  |           | Total Refund/Due        | : \$                                 | -                   |  |
|                             |  |            |           | Vendor#                 | :                                    | -                   |  |
|                             |  |            |           | Input Date              | :                                    | -                   |  |
|                             |  |            |           | Paid                    | :                                    | -                   |  |
|                             |  |            |           |                         |                                      |                     |  |
| Rev 08/14                   |  |            |           | Assessment:             |                                      |                     |  |

## **Instructions for Construction Project Cost Report**

#### **General Instructions**

#### **Purpose of Form**

This form is used for taxpayers to calculate the actual use tax due from construction projects requiring City building permits and reconcile such tax with the estimate prepayment remitted when the permit was obtained. Any underpayment must be remitted within 30 days of the issuance of Certificate of Occupancy. This report will also serve as a Claim for Refund in the case of an overpayment.

#### Reminders

Primary contractor is liable for use tax. Pursuant to Sec 98-84 of the *Arvada Municipal Code* (Code), the person who is responsible for obtaining a City building permit shall remit use tax on construction materials used on the project. This includes all materials, including materials used by subcontractors, purchased form sources inside and outside of the City.

**Setoff of other taxes prohibited.** Contractors must present a copy of the City building permit when purchasing materials to avoid payment of municipal sales or use tax. Contractors may not take a credit against Arvada use tax for taxes paid to other jurisdictions.

Supporting documentation is required for all refund claims. Contractors claiming an overpayment of use tax must submit with this report a copy of the City building permit and a job cost report, profit and loss statements, or other summary documents supporting the amount of materials used. If some work on the project was performed by subcontractors, project cost reports declaring their materials costs must also be submitted. If Arvada sales tax was paid on the construction materials then copies of the invoices would also be required.

Report does not preclude an audit. Some projects may be selected for further examination by the Revenue Division. If this project is selected, you will be contacted by an auditor to schedule a time to review additional documentation. The Code requires that records be preserved for at least three years after the final Certificate of Occupancy is issued.

Claims may be barred from the Statute of Limitations.

 Any other claims must be submitted on or before three years after the date of such overpayment was paid to the City.

**Refunds are not assignable.** The right of any person to obtain a refund shall not be assignable.

**Signature required**. The person completing the claim on behalf of the taxpayer must sign and date the form at the bottom. A printed name is also required. If the taxpayer is not a natural person, the title of the office or agent completing the form on behalf of the taxpayer must also be printed on the form. Forms without a signature will be returned and may not be considered timely filed.

### **Specific Instructions**

**Line 1 thru 6 – Taxpayer Information.** Print the legal name, the trade or other name the taxpayer is known as, and the mailing address of the organization. For reports by natural persons, print the last name followed by the first name on line 1 and do not complete line 2.

Line 7 – City Account Number. If the taxpayer is licensed with the City, list the (7 or 8 digit) account number.

**Line 8 – Building Permit Number.** List the (7 digit) Arvada building permit number.

Line 9 – Certificate of Occupancy (CO) Date. List the date that the CO was issued for the project. If this project did not require a CO, enter the date the project passed final inspection by the building official.

Line 10 – Project Street Address. List the Arvada street address of the project.

**Line 11 – Brief Description of Work Preformed.** Give a description of the work performed. Details may include the tenant's or property owner's name, subcontractors, etc.

Line 12 – Construction Material Costs. Enter the purchase price (less tax) paid for all construction materials used in the project. Include all materials regardless of whether they were purchased from sources inside or outside the City, they were purchased by the contractor or the property owner, or they were used by the contractor, subcontractor, or other person performing work on the project.

Line 13 – Use Tax Due. Compute the use tax due on the project by multiplying the amount on line 12 by 3.46% (the Arvada use tax rate).

**Line 14 – Estimated Pre-payment Amount.** Enter the amount of use tax paid when the building permit was obtained. This amount is listed on the bottom of the permit with other permit and building fees.

Line 15 – Overpayment Amount. If the amount on line 14 is *greater than* the amount on line 13, subtract line 13 from line 14 and enter the difference on this line 15. Do not complete the remaining lines except for the signature area. Attach the required supporting documentation and submit the report.

**Line 16 – Underpayment Amount.** If the amount on line 14 is *less than* the amount on line 13, subtract line 14 from line 13 and enter the difference on this line 16. This is the additional amount of use tax due to this project net of the estimated pre-payment amount.

Line 17 – Late Filing Penalty. If this report is being filed more than thirty (30) days after the date listed on line 9, and additional use tax is due, a late filing penalty must be added. Multiply the amount on line 16 by 10% and enter this amount on line 17.

**Line 18 – Interest.** If this report is being filed late (see instruction for line 17) and additional tax is due, interest must be added. Multiply the amount listed on line 16 by 1% and multiply this result by the number of months the tax remains unpaid.

**Line 19 – Total Due.** Add the amounts in lines 16, 17, and 18 together. This is the total amount due. Make payment to the City of Arvada and remit it along with the signed report.

**Signature** – After reviewing the form for accuracy, sign and date the form. Print your name and title below your signature. Return the form to the Revenue Division along with the required documentation.

**Review & Documentation** – The review time required will vary depending on the nature and scope of the claim. If necessary, the claim will be assigned to an auditor who may contact you regarding the review.

If the claim is approved, a refund check will be sent approximately two weeks after approval.

**Denied Claim** – If the claim is denied, in full or in part, written notice of the determination will be sent along with the payment, if any. Such determination may be protested within thirty (30) days of issuance, pursuant to Sec. 98-75 of the Code.

Return completed form to:



Revenue Division - Sales Tax 8101 Ralston Road / P.O. Box 8101 Arvada, CO 80001-8101