

STATE OF ARKANSAS
CONSOLIDATED INCENTIVE ACT OF 2003

TAX BACK PROGRAM

ANNUAL SALES AND USE TAX REFUND REQUEST by DEVELOPER

To: Department of Finance and Administration
Tax Credits/Special Refunds Section
P. O. Box 1272
Little Rock, AR 72203

I, _____ (an officer, partner, or sole owner) of the business stated below, request a refund of Arkansas Sales and Use Taxes paid on qualified materials, machinery and equipment purchased in connection with a project approved by the Arkansas Economic Development Commission for _____ (name of Tax Back business).

I certify that the materials, machinery and equipment included in this request for refund are expected to qualify under this Act. I certify that the Tax Back business will receive the benefit of this refund by having the cost of construction or lease payments reduced by the amount of tax refunds that are received.

I further certify that we will keep on file or be responsible for making available all purchase invoices relating to our claim for refund and understand that failure to make such invoices available within a reasonable time may result in a denial of refund for those taxes.

Calendar Year Covered by Refund Request _____

***For projects approved on or after July 1, 2005, the state refund will be limited to 5%. Although the current state tax rate is 6%, the law does not allow a refund of taxes dedicated to the Educational Adequacy Fund (.875%) and the Conservation Tax Fund (.1215%)**

Amount of Refund Requested:	*State Tax:	\$ _____
Local Tax (name/code) _____		\$ _____
Local Tax (name/code) _____		\$ _____
Local Tax (name/code) _____		\$ _____
	Total	\$ _____

Business Name _____ FEIN _____

Address _____ Phone # _____

Contact Person _____ Phone # _____

Sales and Use Tax Permit Number _____

Signature/Title _____ Date _____