

SALES & USE TAX CLAIM FOR REFUND - URBAN ENTERPRISE ZONE BUSINESSES
For Property and Services Used Exclusively Within a Qualified Zone(s)

SECTION ONE	
1. BUSINESS NAME:	
2. IDENTIFICATION NUMBER:	

3. FOR DIVISION USE ONLY -

CHECK TO BE MAILED TO:

4. ATTENTION OF: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

5. UEZ PERMIT NUMBER: _____

6. PERIOD FOR WHICH CLAIM IS MADE:

Beginning: _____

Ending: _____

7. TOTAL REFUND REQUESTED:

\$ _____

SECTION TWO

INDICATE METHOD OF SUBMISSION (placing an "X" in the box to the left).

1 ELECTRONIC Spreadsheet (A-3730-UEZ-1) is required to be submitted on compact disc for claims with 25 or more transactions.

2 MANUAL Spreadsheet (A-3730-UEZ-1) is substituted for the electronic spreadsheet for claims with less than 25 transactions.

SECTION THREE

AFFIRMATION: This claim contains only purchases of property and/or services used exclusively at my business location within an Urban Enterprise Zone(s), the information submitted is true and accurate, and the underlying documentation will be retained for a period of no less than 4 years from the postmark date of this claim and will be made available to the Division of Taxation upon request. Further more, I understand the Division of Taxation reserves the right to audit and perfect this claim within the statutory period (4 years). I declare under the penalties of perjury that this claim (including any accompanying schedules and statements) has been examined and to the best of my knowledge and belief is true and correct.

8. SIGNATURE OF AUTHORIZED INDIVIDUAL SUBMITTING CLAIM: _____

9. **PRINT** - Name & Title of Signing Officer/Owner/Representative _____

10. DATE OF SIGNATURE: _____ / _____ / _____

11. TELEPHONE # _____

() EXTENSION

12. E-MAIL ADDRESS: _____

Along with this completed claim form submit: required schedule, and when required a fully completed Power of Attorney. (See INSTRUCTION pages for all details & address.)