Financial Services
Sales Tax Division
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P.O. Box 580
Fort Collins, CO 80522

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fcgov.com/salestax

CITY OF FORT COLLINS USE TAX RETURN

Name: _____ Account Number:_____

Address: _____ Period Covered:_____

City, State, Zip: _____ Due Date:_____

Phone: _____

This return is to be used to report tangible personal property purchased to start and maintain a business. Penalty & interest apply to all delinquent tax.

INSTRUCTIONS:
Complete this schedule by listing all articles used or consumed in your business for which no City of Fort Collins sales tax as paid. The City use tax is imposed on the storage, use, distribution, or other consumption of all tangible personal property (i.e. equipment and sales) EXCEPT:

a. property purchased for which a 3.00% City of Fort Collins sales tax has been paid.
b. property which is specifically exempt under the Fort Collins Use Tax Ordinance. Exempt purchases include property purchased for resale; purchases by a licensed exempt organization; property for which a retail sales tax (equal to or greater than 3.00%) has been imposed and collected by another Colorado municipality.

FOR DETAILS AS TO SPECIFIC EXEMPTIONS, PLEASE CONTACT THE SALES TAX OFFICE.

1. LIST OF PURCHASES – ATTACH SCHEDULE IF ADDITIONAL SPACE IS NEEDED. IF ANY EQUIPMENT IS LEASED, WRITE THE NAME AND ADDRESS OF LEASOR BELOW.			
Date of Purchase	Source of Purchase Vendor's Name & Address	Type of Purchase	Purchase Price Subject to Tax
2. TOTAL PROPERTY SUBJECT TO CITY OF FORT COLLINS USE TAX:			
3. AMOUNT OF CITY USE TAX DUE: (3.00% OF LINE 2)			
4. PENALTY: (10% OF TAX)			
5. INTEREST: (1% PER MONTH FOR EACH MONTH PAST DUE)			
6. TOTAL DUE: (MAKE CHECKS PAYABLE TO CITY OF FORT COLLINS)			

I, hereby certify, under penalty of perjury, that the statements made herein are to the best of my knowledge true and correct.

_____ _____ _____
Agent or Officer Title Date