



### CLAIM FOR REFUND OF COLORADO SPRINGS SALES AND/OR USE TAX

- Utility Refunds require a Colorado Springs Utilities Consent for Release of Customer Information form for both residential and commercial customer types, see links below:
  - A.) Commercial <https://www.csu.org/CSUDocuments/consentforreleaseofcustomerinfocommercial.pdf>
  - B.) Residential <https://www.csu.org/CSUDocuments/consentforreleaseofcustomerinfores.pdf>
- A claim by an agent must be accompanied by a power of attorney, if necessary

Name of Claimant: \_\_\_\_\_ License/Account# \_\_\_\_\_

Residence or Business Address: \_\_\_\_\_  
Post Office Box or Street Address City, State Zip Code

Mailing Address: \_\_\_\_\_  
(If different from Residence/Bus Add)

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Period(s) From: \_\_\_\_\_ To: \_\_\_\_\_

Items Purchased From: \_\_\_\_\_

Address: \_\_\_\_\_

Total Price of Items Purchased: \$ \_\_\_\_\_

Amount of Sales/Use Tax Paid: \$ \_\_\_\_\_

Amount of Claim: \$ \_\_\_\_\_

Reason for Claim: \_\_\_\_\_

I declare, under penalty of perjury, that this claim, and all accompanying schedules and statements, have been examined by me and to the best of my knowledge and belief are true, correct, and made in good faith, pursuant to City of Colorado Springs Sales and Use Tax Code and Regulations issued under authority thereof.

Authorized Representative/Title (Print): \_\_\_\_\_

Signature of Authorized Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**OFFICE USE ONLY**

Original Amount of Claim: \$ \_\_\_\_\_ 65120-001-6110 \$ \_\_\_\_\_

Amount added/(rejected): \$ \_\_\_\_\_ 65120-118-5901-9160028 \$ \_\_\_\_\_

Total Claim Allowed/Paid: \$ \_\_\_\_\_ 65120-171-1300-9160028 \$ \_\_\_\_\_

I Hereby Authorize the Refund of: \$ \_\_\_\_\_

Audited By: \_\_\_\_\_ Date: \_\_\_\_\_

For Director of Finance \_\_\_\_\_ Date: \_\_\_\_\_

**CLAIM FOR REFUND OF COLORADO SPRINGS SALES AND/OR USE TAX**

**INSTRUCTIONS:**

1. Utility Refunds require a Colorado Springs Utilities Consent for Release of Customer Information form for both residential and commercial customer types, see links below:  
A.) Commercial <https://www.csu.org/CSUDocuments/consentforreleaseofcustomerinfocommercial.pdf>  
B.) Residential <https://www.csu.org/CSUDocuments/consentforreleaseofcustomerinfores.pdf>
2. The claim must set forth in detail each ground upon which it is made, and facts sufficient to inform the Director of Finance of the exact basis thereof.
3. The claim should be signed by the taxpayer, if possible. Whenever it is necessary to have the claim executed by an attorney or agent, on behalf of the taxpayer, an authenticated copy of the document specifically authorizing such an agent or attorney to sign the claim on behalf of the taxpayer should accompany the claim.
4. Where the taxpayer is a corporation, the claim shall be signed with the corporate name, followed by the signature and title of the officer having authority to sign for the corporation.
5. Any false statement made by the applicant for Sales/Use Tax Refund is punishable on conviction by a fine not more than \$500.00 or a sentence not exceeding three (3) months of both.
6. Please direct all questions to (719) 385-5903.
7. Appropriate documentation **MUST BE** included with Request for Refund or it will delay the processing of your claim.