

## City of Edgewater c/o Finance Department 1800 Harlan Street, Suite C Edgewater, CO 80214

Phone: 720-763-3003
Email: salestax@edgewaterco.com

Name of Business:						Company Name: (If different)			
Physical Address:						Mailing Address: (if different)			
City of Edgewater Account #:									
City of	f Edgewater Ac	count #:				<u></u>			
Report Period: MonthYear						Check here if this is an amended return			
1	Gross Sales & Service				6	City Sales Tax 3.5% of Line 5			
2A	Add: Bad Debts Collected				7	Excess Tax Collected			
2B	PB Total 1 + 2A				8	Adjusted City Tax (Add Lines 6 + 7)			
3	A. Non-taxable Service				9	Service Fee Allowed (2% of line 8 up to \$200 max.) Must enter zero if return is late.	0.02		
	B. Sales for Resale				10	TOTAL SALES TAX (line 8 minus line 9)			
	C. Shipped Out of City				11	Use Tax Due (Fill out completely schedule B below)	0.035		
	D. Bad Debts				12A	TOTAL TAX DUE (Add Lines 10 & 11)			
	E. Trade-Ins for Resale				12B	Penalty 10% of Total on line 12A if late	0.10		
	F. Gas & Cig	arettes	-		12C	Interest 1.0% per month x line 12A	0.0125		
	G. Government, Religious, Charitable				13	TOTAL TAX , PENALTY & INTEREST (Add Lines 12A & 12B & 12C)			
	H. Returned Goods				14A	*Add			
	I. Prescriptions				14B	*Deduct			
	J. Other Deductions (List on separate sheet)				*Please Use Line 14A or 14B only if you have received notification from the City to do so.				
4	Total Deduction	eductions(add lines A - J)							
5	Net Taxable (I	ine 2B minus line 4)			15	TOTAL DUE AND PAYABLE >>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>>	·>>>		
SCHEDULE B - CITY USE TAX									
The Edgewater Municipal Code (Sec. 4-3-320) imposes a tax on every person who uses, stores or consumes tangible									
personal property or services  Date of Purchase Name of Vendor & Address					/ices	purchased inside or delivered into the City.  Type of Commodity Purchased	Purchase Price		
Duto	or r uronasc	Numb of Venuor	le of Velidor & Address			Type of commonly raismassa	- 1 01011	45611166	
Use second sheet if						price of property/service subject to City use tax.>>>  Multiply total amount above X 3.5% and enter here.>>>			
IM	needed. PORTAN	YOU MUST FI				DRMATION BELOW & SIGN YOUR RETURN.			
						BY THE 20TH OF THE MONTH FOLLOWING REPORTING P	ERIOD.		
Please	check here 🗖 if	changes to mailing or business	address.		lare un	der penalties of perjury that the information contained on this form is true lge.	and correct	to the best of	
Check if Applicable: Business					nature	:Date:			
Print Closed Date:				Prin	t Nam	ne:Title:			
				Ema	ail:	Phone:			
M	ake check p	ayable to:				Remit completed form and payment to:			
City of Edgewater City of Edgewater • 1800 Harlan Street, Suite C • Edgewater, CO • 80214									