



City of Seattle

DEPARTMENT OF FINANCE AND ADMINISTRATIVE SERVICES
LICENSE AND TAX ADMINISTRATION

APPLICATION FOR CERTIFICATE OF REDUCED RATE FOR QUALIFYING MANUFACTURERS SWEETENED BEVERAGE TAX - SMC CHAPTER 5.53

1. Name of Organization: _____ Cust Nr: _____

Trade Name: _____

Business Address: _____ Phone: (_____) _____

Mailing Address: _____ Fax: (_____) _____

City: _____ State: _____ Zip Code: _____

2. Contact Name: _____

Contact Email: _____

Contact Address: _____

Contact Telephone: (_____) _____

3. The organization applying for exemption must meet the following criteria (SMC 5.53.030 (B)):

Be a manufacturer with worldwide gross income of more than \$2,000,000 but less than \$5,000,000 in the prior calendar year.

4. Attach a copy of prior years business IRS tax return and/or Audited Financial Statement:

Submit application with copy of federal tax return page showing gross income such as page one from either form 1120, 1120S, Schedule C, or 1065 depending on the entity type. A business may also provide pertinent pages from audited financial statements.

APPLICATION FOR CERTIFICATE OF REDUCED RATE FOR SWEETENED BEVERAGE TAX- CONTINUED

The organization named on this application will comply with all the requirements of Chapter 5.53 of the Seattle Municipal Code and the Rules and Regulations pertaining thereto.

If the foregoing representations are materially inaccurate or breached, and the sweetened beverage tax is due, the distributor claiming the exemption will be responsible for payment to the City of Seattle the amount of such taxes found due, together with penalties and interest thereon from the time of collection of the sweetened beverage tax.

It is understood and agreed that the Director of Finance and Administrative Services will be promptly notified in writing of any subsequent change in conditions from the facts stated above or status of the organization.

It is understood that any certificate of exemption that is issued from this application **must be renewed by November 30 of each year.**

Print Name: _____

Signature: _____

Title: _____

Date: _____