

SEMINOLE COUNTY, FLORIDA UTILITY TAX REMITTANCE FORM

COMPANY NAME: _____

ADDRESS: _____

TYPE OF UTILITY: ___ POWER ___ GAS ___ FUEL OIL ___ WATER

REPORT FOR THE MONTH OF _____ , _____

Report is due by the 15th of the following month

	UTILITIES	FUEL OIL
GROSS SALES (Dollars/Gallons)	\$ _____	_____
LESS : EXEMPT SALES	\$ _____	_____
NET TAXABLE SALES	\$ _____	_____
FUEL TAX (\$.016 per gal)		\$ _____
UTILITY TAX (4%)	\$ _____	
LESS: COLLECTION ALLOWANCE (1%)	\$ _____	_____
TOTAL TAX DUE		\$ _____

I hereby certify that this return has been examined by me and to the best of my knowledge and belief is a true and correct return.

(Signature of preparer)

(Signature of dealer)

Signed this _____ day of _____ , _____

Please make checks payable to: Seminole County BOCC

Remit Payment To: Seminole County Finance Department
PO Box 8080
Sanford, Florida 32772-0869