
Danville/Tilton/Vermilion County Enterprise Zone

Revised August 2013

APPLICATION FOR SALES TAX CREDIT

To Owner/Contractor:

Complete this form to receive a Sales Tax Abatement form from the State of Illinois

NAME OF PROJECT: _____

STREET ADDRESS: _____

OWNER NAME/ADDRESS: _____

CONTRACTOR: _____

PROJECT DESCRIPTION: _____

PROJECT TYPE: Retail _____ Service _____ Industrial _____ S.F. Residential _____ M.F. Residential _____

TYPE OF BUSINESS: _____ NAICS # _____

CONTRACTOR FEIN: _____ UIN: _____

CONTRACTOR E-MAIL _____ CONTRACTOR PHONE _____

Contract amount: _____

Estimated average tax rate _____ % of contract that is tax exempt material _____

Estimated amount of exemption for purchased materials: _____

ESTIMATED COST OF PROJECT BUILDING MATERIALS: _____

EXPECTED DATE OF PROJECT START: _____ COMPLETION: _____

Identify the building material you are purchasing:

JOB INFORMATION:

Current Number of Full Time Equivalent Jobs at Location: Professional: _____ Skilled: _____ Unskilled: _____

Number of Jobs to be **Retained** as a Result of this Project: Professional: _____ Skilled: _____ Unskilled: _____

Number of Full Time Equivalent Jobs to be **Created** on Completion as a Result of this Project:

Professional: _____ Skilled: _____ Unskilled: _____

Authorized Signature

Date