

City of Ferndale, WA

Utility Users Tax

References: Ordinance 1607 & Ferndale Municipal Code Chapter 3.26

Reporting Period (Monthly) _____ to _____

Company Name:

FEIN:

Company Address:

Gross Sales	
Less: Tax Exempt Sales	
Net Sales Subject to Tax	
Tax Rate	6%
Gross Tax	
Less: Uncollectables	
Less: Vendor's Compensation	
Less: Tax Credits	
Net Tax Amount to be Remitted	

(Signature here)

Tax Payor ---> _____ (Name of Tax Payor/Title) _____ Date: _____

I hereby declare that all information provided herein is true, complete and accurate to the best of my knowledge.

(Signature here)

Tax Preparer ---> _____ (Name of Tax Preparer/Title) _____ Date: _____

I hereby declare that all information provided herein is true, complete and accurate to the best of my knowledge.

REMIT TO:

City of Ferndale
P.O. Box 936
Ferndale, WA 98248