Rural Areas of Opportunity

Application for Certification

Exempt Goods and Services Sales Tax Refund

Based on section 212.08 (5)(q), Florida Statutes (F.S.).

Date of Application			ication Number vided by Florida artment of Commerce)		
Taxpayer Name					
F.E.I.N. or S.S.N.					
Mailing Address					
Property Address					
Assessment Roll Parc	el Number				
		Northwest RAO			
Rural Area of Opportu	nity	South Central RAO			
	-	North Central RAO			
Expiration Date of Rur	al Area of Opportunity	t			
Description of New Construction					
Beginning Date of New Construction (must be after July 1, 2017)					
Description of Tangible Personal Property rented					
Description of Commercial Pest Control Services					
Building Permit Number (attach a copy of permit)					
Building Inspector					
Phone		Ema	il		
Date of certificate stating that the improvement to the real property was new construction and that improvements are substantially completed (attach a copy of certificate)					
Date when new construction is first subject to assessment					

FORM RAO N. 10/17 TC 02/24 Rule 12-26.008, F.A.C. Effective 04/18

Exempt Goods and Services

- Attach a copy of each invoice listing the amount of sales tax paid for all eligible building materials, rentals of tangible personal property, and pest control services used to complete the new construction project. Please provide additional descriptions of materials included on the attached invoices in cases where the information provided on the invoice is unclear or the material is not commonly known to persons unfamiliar with the construction industry.
- Attach a sworn statement from the licensed contractor(s) or applicant stating that all materials submitted were used on a new construction project and that Florida sales tax has been paid.

Please complete this page if you are including invoices to document the goods and/or services eligible for refund. A separate sheet may be used if necessary to account for all exempt goods or services.

List of Exempt Goods or Services	 Sales Price Rental Payment Cost of Services 	Florida Sales Tax Paid
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
TOTAL	\$	\$
	Factor	X .975
Amount Eligible for a sales tax refund		\$

\$10,000.00 Maximum per parcel of real property

\$500.00 Minimum per parcel of real property

Please complete this page if you are using the property valuation method to determine the eligible refund amount. If using this method, attach the final ad valorem tax assessment notice for the year the new construction is first subject to ad valorem tax and the immediate prior year final ad valorem tax assessment.

1. Assessed value after new construction:	\$ Assessment Date:	
2. Assessed value before new construction:	\$ Assessment Date:	
3. Line 1 minus Line 2 =	\$	
4. Line 3. x .40=	\$	
5. Line 4. x 6% (state sales tax rate) =	\$	
6. If applicable, add County Surtax * =	\$	
7. Total of Line 5 and Line 6 =	\$	
8. Line 7 x .975 =	\$ Amount eligible for a sales tax refund	

* Pahokee, Immokalee, and South Bay = \$0.00
 Calhoun County, City of Freeport, Desoto County, Gadsden County, Jackson County, Liberty County, and Madison County = \$75.00
 All other = \$50.00

\$500.00 Minimum per parcel of real property	\$10,000.00 Maximum per parcel of real property
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Taxpayer Signature

Under penalty of perjury, I declare that I have read the foregoing application for certification and the facts stated in it are true to the best of my knowledge and belief.

Signature of Taxpayer	Date
Name of Taxpayer	Phone Number

For	Florida Department	of Comme	rce Use Only		
Application Number		Rural Area			
NUMDEr		of Opportunity			
The applicant is hereby eligible to apply for a sales tax refund in the amount of					
Florida Department of Commerce Program Manager Signature			Date		
Phone Number		Email			
When completed, Form RAO is to be sent to: Florida Department of Commerce Division of Strategic Business Development 107 E Madison St MS 180 Tallahassee, Florida 32399-6545					
	850-71	7-8960			
850-717-8960 To be eligible for a sales tax refund from the Department of Revenue, the taxpayer is required to send a copy of Florida Department of Commerce's certification approval letter and approved Application for Certification (Form RAO); and an Application for Refund (Form DR-26S) to:					
Florida Department of Revenue Refunds Sub-Process PO Box 6490					
	Tallahassee, Flo	orida 32314-6	490		
Form DR-26S must reach the Florida Department of Revenue within six (6) months after the date of certification that the new construction is substantially completed; or by November 1st after the new construction is first subject to assessment.					
Florida law requires that refund applications be supported with sufficient information and documentation to determine eligibility and the refund amount due. Upon receipt, the Department will review your application and supporting documents and information. You will be notified if additional information and documentation is needed.					
References					
	ere mentioned in this form and The forms are available online		d by reference in the rules indicated below. 		
Form DR-26S	Application for Refund - Sa	ales and Use Tax	Rule 12-26.008		