City of Sioux Falls

Sales Tax Refund Application



224 West Ninth Street, P.O. Box 7402, Sioux Falls, SD 57117-7402

Application Instructions

Pursuant to Article XI, Sections 39-172 through 39-182, of the Revised Ordinances of Sioux Falls, SD, offers a refund or credit for sales tax paid by person(s) who incur costs for **the furnishing and equipping only** of a new business facility that satisfies the eligibility requirements as set forth in Section 39-174 of the Revised Ordinances of Sioux Falls, SD. The refund shall not apply to capital assets purchased to replace capital assets for which a refund has been claimed during such 36-month period or extended. THERE IS NO REFUND IF THE PERSON FAILS TO MAKE APPLICATION WITH THE FINANCE DIRECTOR FOR THE CITY OF SIOUX FALLS.

Eligibility Requirements:

No refund may be made unless:

- (1) The project includes new construction that adds at least \$5,000,000 in taxable value to the city's property tax base, or an investment in non-realty capital assets of not less than \$10,000,000, or if the combination of new construction and non-realty capital assets exceeds \$10,000,000;
- (2) The facility is used directly in (a) the manufacture or processing or fabricating or compounding of personal property which is intended to be sold or leased for final use consumption, or (b) data processing, hosting and related services including payroll services, financial transactions processing as those terms are defined by 2002 NAICS, or (c) research and development in the (i) social sciences, (ii) humanities, and (iii) physical, engineering, and life sciences as those terms are defined by 2002 NAICS; and
- (3) The person makes application for the refund from the finance director as set forth in § 39-176;
- (4) The project is not ineligible under § 39-175.

A project is ineligible for a tax refund if it is:

- (1) Used predominantly for the sale of products at retail to individual consumers;
- (2) Used predominantly for residential housing or transient lodging;
- (3) Used predominantly to provide health care services; or
- (4) Not subject to ad valorem real property taxation or equivalent taxes measured by gross receipts.

Any person desiring to claim a refund shall make application to the City Finance Director at least 30 days prior to the earlier of the construction commencement or the ordering of equipment to be used in a new business facility. A separate application shall be submitted for each project. Please complete the application form entirely itemizing the furnishings and equipment which you are claiming as eligible for sales tax refund.

Applications may be filled out and returned via mail or email. Mail or drop off the completed application to:

City of Sioux Falls/Sales Tax Refund Application Attention: Finance Director 224 West Ninth Street P.O. Box 7402 Sioux Falls, SD 57117-7402

Or email the completed application to: thuber@siouxfalls.org

If you have questions, please feel free to call the Finance Department at 605-367-8860 or fax them at 605-367-8016.



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Company Information						
Owner, Partner, or Corporation Name		Federal Employe	al Employer's Identification Number (FEIN)			
Address (Street, City, County, State, Zip)						
Telephone Number	Fax Number		Email			
Mailing Address (if different from above)						
Business Name (if different from above)						
Business Address (if different from above)						
Type of Ownership Single Owner Trust Partnership LLC—State of Incorporation Date of Inco						
Individual responsible for filing refund forms (Name, Address, Phone, and Email)						
I certify the following:						
(1) The project includes new construction that adds at least \$5,000,000 in taxable value to the city's property tax base, or an investment in non-realty capital assets of not less than \$10,000,000, or if the combination of new construction and non-realty capital assets exceeds \$10,000,000;						
(2) The facility is used directly in (a) the intended to be sold or leased for fina services, financial transactions proce the (i) social sciences, (ii) humanities NAICS; and	al use consumption essing as those te	n, or (b) data proce rms are defined by	ssing, hosting and 2002 NAICS, or (c	related servi e) research a	ces including payroll nd development in	
(3) I am making application for refund from the Finance Director as set forth in § 39-176 of the Revised Ordinances of Sioux Falls, SD;						
(4) The project is not ineligible as specified under § 39-175 of the Revised Ordinances of Sioux Falls, SD.						
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Signature of Applicant Print Name of Applicant Project Name, Location, and Legal Description:						
Project Name, Location, and Legal Des	sсприоп.					
Itemize the equipment and furnishings	which are eligible	e for sales tax refu	nd. (<i>Please provid</i>	le a separate	sheet if necessary.)	
Estimated Total Cost of the Project		Construction Date		Completion Date		
Ownership Information						
Name Social Security Number			Title	Title		
Address		City	State	State Zip		
Name Social Security N		urity Number	Title			
Address		City	State	е	Zip	
Name Social Security Number			Title	T		
Address		City	State	е	Zip	
Name	Social Security Number			Title		
Address		City	State	е	Zip	