

**CONFIDENTIAL**  
**City of Stockton**  
**Use Tax Business Incentive Program**



**Annual Application Form**

*(Please complete this form in its entirety and attach copies of the two most recent quarterly reports to the State Board of Equalization, along with a copy of your Sales/Use Tax permit with City of Stockton identified. Rebates amounts exceeding \$100,000 must be approved by the City Council via a public hearing per AB562. Type/print clearly.)*

Legal Business Name: \_\_\_\_\_

DBA Name: \_\_\_\_\_

Physical Business Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Description of Business: \_\_\_\_\_

Sales/Use Tax Permit No.: \_\_\_\_\_

Business Tax Certificate No.: \_\_\_\_\_

Stockton Business License No.: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone No. \_\_\_\_\_

Email Address: \_\_\_\_\_

*I hereby certify that the information on this form is accurate and complete.*

\_\_\_\_\_  
Print Applicant Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**FOR CITY USE ONLY**

Application received on: \_\_\_\_\_

Highest amount of use tax received from applicant over the past 3 years: \$ \_\_\_\_\_

Net new use tax received by the City for periods \_\_\_\_\_ to \_\_\_\_\_ : \$ \_\_\_\_\_

Rebate percentage based on net new revenue: \_\_\_\_\_% Amount of Rebate: \$ \_\_\_\_\_

Application approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Economic Development Department)

Amount of rebate verified by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Administrative Services Department)

Check issued: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Check Number: \_\_\_\_\_