



2014

Pre-certification of Qualified Enterprise Zone Business Instructions

Note—Beginning January 1, 2012, pre-certification is required prior to performing activities that are eligible for Enterprise Zone income tax credits. Both pre-certification and the typical certification process can now be facilitated electronically through the Colorado Department of Economic Development's Enterprise Zone Web page www.AdvanceColorado.com/EZ.

Pre-certification

After reading and signing the affirmation statement for your business, give the form to your Enterprise Zone Administrator. Enterprise Zone Administrators will sign their affirmation statement and return the form to the business.

Certification Instructions: All claimants must complete Section I. Complete any part of Section II, including business address, that applies to your tax situation.

If you have more than one business location in this enterprise zone that requires precertification, attach a list of business locations to this form.

Complete this form only if you cannot do so electronically. Electronic submissions reduce errors that may delay the processing of your applications and income tax returns.

For a list of Enterprise Zone Administrators visit www.AdvanceColorado.com/EZ

I certify that I am aware of the Enterprise Zone program, that Enterprise Zone tax credits are a contributing factor to the startup, expansion or relocation of my business in the Enterprise Zone, and I acknowledge that this pre-certification is for activities that shall commence after the date that the Enterprise Zone administrator signs this form to pre-certify, through the end of my business's current income tax year.

Business Owner or Authorized Company Official Signature

Date (MM/DD/YY)

I hereby certify to the State of Colorado, Department of Revenue, that the above named facility is entirely within the designated Enterprise Zone; and hereby pre-certify this business in my Enterprise Zone.

Enterprise Zone Administrator

Date (MM/DD/YY)

Section I

For tax years beginning after August 6, 2002, this certification is public record and copies will be available from the enterprise zone administrator.

Check here if this certification is for an earlier tax year and is a confidential tax document:

Tax Year Beginning (MM/YY)

This form certifies that your facility is located within the boundaries of a Colorado Enterprise Zone, and collects information required by §39-30-103(4), C.R.S.

To claim the Colorado Enterprise Zone income tax benefits:

- Calculate your Colorado Enterprise Zone Tax Credits, following the instructions on DR 1366.
- If filing electronically, you can expect an email from your Enterprise Zone Administrator within 3–4 business days of submission. Or, if you must file on paper and would like a copy of this form returned to you by the Enterprise Zone Administrator, be sure to enclose a self-addressed stamped envelope.
- **Do not send this form to the Department of Revenue or Office of Economic Development and International Trade for Certification.**
- Submit a copy of the **certified** form when you file your Colorado Income Tax return. Certification is not required for an Enterprise Zone Investment Tax Credit of less than \$450. A new form is required each year you claim Colorado Enterprise Zone Tax Credits.
- Note to "S" Corporation and Partnership filers: Please provide to all appropriate partners and shareholders a copy of the certificate along with a calculation of their proportionate share of any enterprise zone credits claimed and attach a copy of the DR 0078A to specify the partner/shareholder name, ID number and amount of credit passed through to them.



Section II

All Claimants must complete this information.

Check here if a certification has been filed for this facility in a prior year: <input type="checkbox"/>	Tax Year Ending (MM/YY)
Enterprise Zone	Type of Business (retail, mfg, farm, etc)

Business Name

Address—Actual Location of Facility	City	State	Zip
-------------------------------------	------	-------	-----

NAICS code from www.census.gov/naics	Colorado Account Number	SSN or FEIN
--------------------------------------	-------------------------	-------------

Date facility began operations at this location	Business Phone Number ()
---	---------------------------

Did this facility relocate from another Colorado location? Yes No

The following information is **required** regardless of whether or not any jobs credits are being claimed. For statistical purposes, self-employed owners and partners working in the business should be counted here, even if they do not qualify as "employees" for other tax purposes.

Number of owners/workers/employees at facility beginning of tax year	Number at end of tax year
--	---------------------------

Change in total (end of year – beginning)	Number of employees transferred from another Colorado facility owned by taxpayer to this facility
---	---

Note: The following section on average compensation is not required if it will reveal the compensation paid to any individual employee.

Employee Category (as defined by employer)	Number of Employees in category	Average Annual Compensation including benefits per employee	Average Hourly Compensation including benefits per employee
Full-time employees			
Part-time employees			
Temporary employees			
Contract employees			

Investment Tax Credit (ITC)

If this was an in-state relocation, no ITC or job training credit is allowed on investment associated with the relocation unless the new facility meets the criteria in New Business Facility "Qualified Expansion" section (2) below.

Total capital investment in zone during year	\$
Capital investment qualifying for ITC during year	\$
Amount of 3% EZ Investment Tax Credit claimed	\$

Job Training Tax Credit

Number of employees trained	Amount of 12% EZ Job Training Tax Credit claimed	\$
-----------------------------	--	----



Name	Account Number
------	----------------

New EZ Business Employees Credit

Number of qualifying new jobs	Were the qualifying employees leased from another company?	<input type="checkbox"/> Yes <input type="checkbox"/> No
-------------------------------	--	--

Amount of new jobs tax credit claimed	\$
---------------------------------------	----

Amount of agricultural processing new jobs tax credit claimed	\$
---	----

Amount of health insurance new jobs tax credit claimed	\$
--	----

Enhanced Rural EZ credits:	Qualified County
----------------------------	------------------

Enhanced new jobs tax credit claimed	\$
--------------------------------------	----

Enhanced agricultural processing new jobs tax credit claimed	\$
--	----

Taxpayer Signature

I declare that all of the above information is true and correct to the best of my knowledge and belief.

Signature of Authorized Company Official/Owner	Print Name	Date (MM/DD/YY)
--	------------	-----------------

Title	Business Name	Colorado Account Number, FEIN or SSN
-------	---------------	--------------------------------------

Tax preparer or other contact for follow up information (please print)	Fax Number ()	Phone Number ()
	E-mail address	

Certification by Zone Administrator

I, the duly authorized administrator of the above-mentioned Enterprise Zone, hereby certify to the State of Colorado, Department of Revenue that the above named facility is entirely within the designated Enterprise Zone.

Effective Date of Zone for the Location (MM/DD/YY)
--

Signature of Zone Administrator	Date (MM/DD/YY)
---------------------------------	-----------------

For more information about Enterprise Zones, contact the agencies listed below

<ul style="list-style-type: none"> ● Colorado Department of Revenue Denver, CO 80261-0005 Phone: 303-238-SERV (7378) www.TaxColorado.com 	<ul style="list-style-type: none"> ● Colorado Office of Economic Development and International Trade 1625 Broadway, Suite 2700 Denver, CO 80202 Phone: 303-892-3840 www.AdvanceColorado.com/EZ
--	---