



County of Volusia

FINANCIAL AND ADMINISTRATIVE SERVICES

Revenue • Ad Valorem Tax

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Tourist Development Tax Amnesty Agreement

On June 5, 2003, the Volusia County Council approved the participation of its Revenue Collection Division in the Florida Department of Revenue tax amnesty program as it relates to **Tourist Development Tax**. The amnesty program is a one-time campaign that runs from July 1, 2003 through October 31, 2003, which will allow eligible taxpayers to satisfy their tax liabilities and avoid criminal prosecution, penalties and some interest. Under this program, eligible taxpayers would receive a complete waiver of penalty for tax liabilities disclosed. Taxpayers who identify a liability unknown by the County would be eligible for a 50% cut in interest charges. If the County has already identified the tax liability in a bill, audit or other assessment, the taxpayer would be eligible for a 25% cut in interest charges. The program covers any taxes due on or before June 30, 2003. All payments must be postmarked by October 31, 2003 in order to qualify.

To be eligible to participate in this program, I (the taxpayer) affirm and agree that:

- I give up the right to contest the tax and interest I report under amnesty.
- I withdraw any pending protest or proceeding about the tax and interest I report under amnesty and understand that any protest cannot be refiled.
- I have not previously entered into a settlement of liability with the County for any tourist development tax I reported under amnesty.
- I give up my right to claim a refund of tax or interest I pay under amnesty and my right to protest the County's denial of any claim I make for a refund of tax or interest I pay under amnesty.
- Any credit or refund of tax or interest I pay under amnesty is limited to amounts paid in error, as determined by the County.
- I have not been convicted of a crime involving a revenue law of this state.
- I understand that the County may reconsider any amnesty given me if I misrepresent my eligibility to participate or I file a false or fraudulent return and form under amnesty.

To apply, provide all information requested below and contact our office for further instructions.

Taxpayer Name: _____ / _____ Date: _____
(Print Name) (Signature)

Taxpayer Street Address: _____

City/State/Zip: _____ Telephone No.: () _____

Federal Employer Identification No. Or Social Security No. _____

Sales tax certificate number (if applicable) _____