

Notice of Intent to Apply for Apportionment by Sales Factor Form

Date: [DATE]

To: Chief Analyst for Incentives
Division of Strategic Business Development
Suite 1902, The Capitol,
402 S. Monroe Street, Tallahassee, Florida 32399-0001

From: [LEGAL NAME OF APPLICANT]
[APPLICANT ADDRESS]
[CITY, STATE, ZIP CODE]

RE: Notice of Intent to Apply for Apportionment by Sales Factor

This notice is provided to the Division of Strategic Business Development pursuant to section 220.153, Florida Statutes.

[APPLICANT] with the Federal Employer Identification Number, [FEIN], intends to submit an Application to apportion its adjusted federal income in order to commence the two year period for measuring qualified capital expenditures.

Signed by Authorized Applicant Official:

Print Name: _____

Title: _____

Phone: _____

Email: _____

Signature: _____