



City of Baton Rouge – Parish of East Baton Rouge
 Dept of Finance-Revenue Division
 P O Box 2590
 Baton Rouge, LA 70821-2590
 Phone 225-389-3084 Fax 225-389-5369
www.brla.gov/659/Taxes

CLAIM FOR REFUND OR CREDIT OF TAXES PAID

EBR City-Parish Account Number: _____ Business Name: _____
 Business Address: _____
 Contact Person: _____ Contact Telephone: _____
 Type of Tax: _____ Contact Email Address: _____
 Period(s): _____

Total Taxes Remitted _____ Preferred Refund Method:
 Total Taxes Due, as amended _____ Credit Memo
 Difference (Total Refund Requested) _____ Refund Check

This refund is claimed for the following reasons (check all that apply):

Mathematical error on return or supporting documents
 Taxpayer failed to claim properly documented eligible deductions on original return (resales, returns, etc)
 Taxpayer construction of the law contrary to the collector’s construction of the law at the time of payment
 Error, omission, or mistake of fact of consequence to the determination of the tax liability by the taxpayer or collector
 Change made by the collector in an assessment, notice or billing issued
 Subsequent determination that taxpayer was entitled to pay a tax at a reduced rate
 Payment exceeded the amount on the face of the return
 Bad debt write-off
 Other (describe): _____

Include the following documents with the application:

- An amended return for applicable periods
- If this application for refund is for multiple months, please attach a monthly detail of taxes remitted, amended taxes due, and refund amounts
- All documentation needed to adequately determine that a refund is due. This may include, but is not limited to original invoices, credit invoices, original tax return, proof of payment, customer exemption certificates, and monthly sales summary.
- For bad debt write-offs, please supply the State’s approval letter and the corresponding federal income tax return.

If all necessary documentation is not simultaneously submitted with this application, the refund request will not be considered as received and ready for review.

Under the penalty of perjury, I declare that, to the best of my knowledge, all the facts alleged above as a basis for reasonable cause (including all accompanying documentation) are true, correct, and complete.

 Printed Name of Applicant

 Signature of Applicant

 Title

 Date