



FUEL LICENSE TAX REPORT

For the Month of: _____

Please make check payable to City of Sandy, 39250 Pioneer Blvd., Sandy, OR 97055.

Payment is due by the 25th of each month for the prior month's collections.

In accordance with Municipal Code Section 5.10.110, if payment is made after the 25th, add 1% penalty.

If payment is made after the end of the last business day of the month, add 1% penalty plus 10% penalty.

Name of Reporting Station: _____

Location (Address): _____

If you have a computer printout that contains this information, it may be substituted for the form by attaching it to the form and mailing it in. Please include calculations for payment.

Pump#	Gas	Diesel	Beginning Reading	Ending Reading	Total Gallons Sold
					0
					0
					0
					0
					0
					0
					0
					0
					0
					0
					0
Total All Gallons:					0
x \$0.02					\$ -
					Amount Due

I certify this report to be accurate:

Dealer Signature _____ Date _____

Contact Name _____ Contact Phone: _____