



**City of Flagstaff**  
**High Efficiency Vehicle 1% Sales Tax**  
**Rebate Application**  
 Tax, Licensing and Revenue Section  
 211 W. Aspen Avenue  
 Flagstaff, AZ 86001  
 Ph: (928) 779-7614

<b>Applicant Information:</b>		<b>Qualified Dealer Information:</b>	
Name:		Name:	
Address:		Contact Person:	
City:	State:	Address:	
Zip:		City:	State:
Daytime Ph:		Zip:	Ph:
Application Date:		Purchase Date:	

<b>Fuel Efficient Vehicle Information:</b>	Purchase Price	\$
Year:	Cash Rebate, if any	-
Make:                      Model:	Trade-in Allowance, if any	-
EPA Rating (Highway):	Taxable Amount	=
VIN:	Total Tax Amount Paid	
Dealer Stock #:	1% Sales Tax Rebate	

Please check off all required documents submitted with this application. Application will not be accepted if incomplete or without following documents:

1. Copy of Registration
2. Copy of Purchase Contract/Invoice
3. Copy of Driver License of Qualified Purchaser

I have read and agree to comply with all program requirements. Mail or drop off completed application with required documents to the address at top of the application. Only complete applications submitted with all required documents will be accepted and processed. Rebate subject to availability.

Applicant Signature \_\_\_\_\_

Signature of applicant must be notarized.

State of \_\_\_\_\_)

County of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_(name of applicant), whose identity was proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and who acknowledged that he/she signed the above/attached document.

(seal)

Notary Public Signature \_\_\_\_\_

**For Program Administrator Use Only:**

Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Program Administrator Signature:</b>
--	---