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City of Oakland Revenue Management Bureau - Audit Section 150 Frank H. Ogawa Plaza, Suite 5342 Oakland, CA 94612

REQUEST FOR REFUND

AUDIT DISCLAIMER: THIS REQUEST WILL PROMPT AN AUDIT OF YOUR CITY OF OAKLAND TAX RECORDS.

Business Tax Account #:

, taxpayer or other person determined to be liable for the tax or

said person's guardian or conservator, hereby request for a refund in the amount of \$ from the above business tax account for the following reason:

Responding to a credit notice
Multiple payments on an account
Amend a tax declaration for one or more tax years
Business closed and the business license was mistakenly renewed
Other: provide details and/or attach supporting documentation

For duplicate credit card payments, contact your financial institution to dispute the charges before submitting a request.

Valid refund claims must include sufficient documentation of proof of payment and a financial basis for the claim. Proof of payment may include, but not limited to, receipts, cancelled checks and bank statements, while financial documentation may include, but not limited to, IRS and sales tax returns, profit & loss, financial statements and employee reports.

This claim should be filed within specific time periods in accordance with Oakland Municipal Code Sections 5.04.540 and 5.04.570. Oakland Municipal Code can be found by visiting <u>www.OaklandCA.gov</u>.

I hereby declare under penalty of perjury that the information contained herein is true and complete.

Name		Signature	Date
Phone Number		Email	

Submit Request or for Questions

City of Oakland Revenue Management Bureau - Audit Unit 150 Frank H. Ogawa Plaza, Suite 5342 Oakland, CA 94612	Lili Deng Ldeng@OaklandCA.gov (510) 238-2982
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