

**CITY OF LOVELAND**

REVENUE DIVISION

Civic Center • 500 East Third • Loveland, Colorado 80537

(970) 962-2708 • FAX (970) 962-2927 • TDD (970) 962-2620

Business Occupation Tax Return 2025

Business Name: _____

Sales Tax Account Number: _____

DBA: _____

FEIN: _____

Address: _____

Phone Number: _____

City: _____

Reporting Period: _____

State: _____ ZIP Code: _____

Return Due: _____

Gross Accounts (per quarter or per year)	
2025 Rate Per Account (\$4.93 per quarter or \$19.74 per year)	
Tax Due	

Name: _____

Signature: _____

Phone: _____

Email: _____

Date: _____

I hereby certify, under penalty of perjury, that the statements made herein are to the best of my knowledge true and correct.