

DISASTER RECOVERY EXEMPTION

This schedule must be submitted when claiming this exemption.

Legal Name of Business

State of Domicile

Federal Employer Identification Number or State Taxpayer Identification Number

Principal Business Address

Street Address

City

State

ZIP Code

Description of Disaster

Beginning Date of Work

Ending Date of Work

Location of Work

Name of Contact Person

Contact Person's Title

Contact Person's Phone Number

Contact Person's Email Address



Instructions for Schedule IN-DRE

Disaster Recovery Exemption

If you are claiming the disaster recovery exemption, you must complete this schedule and submit it to the Indiana Department of Revenue. Otherwise, this exemption will not be allowed.

To qualify for this exemption, an out-of-state business must perform disaster emergency-related work during a disaster period, at the request of an Indiana business. For more information on eligibility requirements and an explanation of what is exempt, see Commissioner's Directive #52 at ww.in.gov/dor/3617.htm.

Line-by-Line Instructions

Enter the legal name or the d/b/a of the business claiming this exemption.

Enter the state where the business is domiciled.

Enter the federal employer identification number (FEIN) of the business or the taxpayer identification number from the state where the business is located.

Enter the principal business address for this business.

Enter a description of the disaster for which the work was performed (tornado, flood, etc.).

Enter the date on which work began and the date on which it ended.

Enter the location where the work was performed (please include the city and county).

Enter the name of the contact person for this business.

Enter the contact person's title.

Enter the contact person's phone number.

Enter the contact person's email address.



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