

DR 0348 (07/11/17)
COLORADO DEPARTMENT OF REVENUE
Denver, CO 80261-0005
Colorado.gov/Tax

Remediation of Contaminated Land Credit Transfer Schedule

You MUST include this schedule with your return if you are claiming this credit.

Last Name or Business Name •			First Name	Middle Initial	
SSN	Colorado Account Num	ber	FEIN		Tax Year Ending
•	•				•
Part A: Transferor's Transfer Of C	redit. Complete this	part if you transfe	rred credit for th	is tax year.	
Credit Amount Available (Total credit amount available from line 9e of the Remediation of Contaminated Land Certificate DR 0349)					mount Available
Detail of credit you transferred for th	is tax year.				
Name of Transferee	• S	SINI I	rado Account Number	Date of Transfer	Amount of Credit
					\$
					\$
					\$
					\$
					\$
					•
					\$
					\$
					_
					\$
					\$
					\$
					\$
					· •
Total Transferred					\$
Credit remaining (credit available, less total transferred).					\$