

DR 0348 (06/10/19)

COLORADO DEPARTMENT OF REVENUE

Denver CO 80261-0005

Colorado.gov/Tax

2019 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 or ITIN	Colorado Account Number	FEIN		Tax Year Ending
•	•	•		•
Transferor's Transfer Of Credit. Co	omplete this part if you transf	erred credit for this tax v	 ear.	
Credit Amount Available (Total credit amount available from line 9e of the Remediation of				mount Available
Contaminated Land Certificate DR 03	349)		•	
Detail of credit you transferred for thi	s tax year.			
Name of Transferee	• SSN or ITIN	Colorado Account Number	Date of Transfer	Amount of Credit
				\$
				\$
				Ψ
				\$
				_
				\$
				\$
				<u> </u>
				\$
				Φ.
				\$
				\$
				_
				\$
				\$
				Ψ
				\$
Total Transferred				Φ.
				\$
Credit remaining (credit available, less total transferred).				\$