Comptroller of Public Accounts FORM 01-159 (7-09)

CLEAR FIELDS | PRINT FORM

TEXAS ECONOMIC DEVELOPMENT AGREEMENT REPORT

City or County name		
Contact name	Contact phone *(Area code and number)*	
Mailing address		
City	State **TEXAS**	ZIP code

DUE ON OR BEFORE SEPT. 1, 2009

Mail completed form to:

COMPTROLLER OF PUBLIC ACCOUNTS
Attn: Tax Policy Division
111 E. 17th Street
Ausitn, TX 78774-0100

WHO MUST FILE – Municipalities and counties that wish to take advantage of the grandfather clause provided under Senate Bill 626 (81st Legislative Session, 2009) in regards to the amendments to 321.203 and 323.203 must provide information to the Comptroller regarding economic development agreements with distribution centers and warehouses and the retail centers served by those facilities.

INSTRUCTIONS – Complete the information below regarding each warehouse or distribution center located within your jurisdiction that is operated by a retailer with whom you have an existing economic development agreement that was entered into under Chapter 380, 381, 504 or 505, Local Government Code, or a predecessor statute, before Jan. 1, 2009, and the name, address and outlet number as assigned by the Comptroller of each retail location in existence and identified as being served by the warehouse as of Jan. 1, 2009. You must complete a separate form for each retailer with whom you have a qualifying economic development agreement.

You must provide a copy of the economic development agreement for each retailer/warehouse you register.

TAXPAYER	Taxpayer name		11 digit Texas Taxpayer number
	Mailing address		
	City	State	ZIP code
WAREHOUSE	Warehouse name		
	Mailing address		
	City	State	ZIP code

RETAIL LOCATIONS SERVED BY WAREHOUSE AS OF JANUARY 1, 2009

Store location name: _____
Location address: _____
City, State, ZIP code: _____
Outlet number (assigned by the Comptroller): .....

Store location name: _____
Location address: _____
City, State, ZIP code: _____
Outlet number (assigned by the Comptroller): .....

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Location address: _____
City, State, ZIP code: _____
Outlet number (assigned by the Comptroller): .....

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Location address: _____
City, State, ZIP code: _____
Outlet number (assigned by the Comptroller): .....

– ATTACH ADDITIONAL PAGES, SCHEDULES OR SPREADSHEETS IF NECESSARY. –

sign here	Date

If you need assistance completing this report, please contact the State Comptroller's office at (800) 531-5441, ext. 3-4062, or (512) 463-4062.
Our e-mail address is tax.help@cpa.state.tx.us.