

Form AS 2921.1

Rev. Jun 26 15



Commonwealth of Puerto Rico
DEPARTMENT OF THE TREASURY
**APPLICATION FOR CERTIFICATION OF QUALIFIED CONTRACTS
SUBJECT TO SALES AND USE TAX**

- Private Contract
 Auction
 (No. _____)
 Building Project
 (No. _____)

Submit one application for each qualified contract.

Purchaser's name and postal address	Social Security or Employer Identification Number
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Purchaser's telephone	Purchaser's Merchant's Registration Number (if applicable)
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Date of the contract related to this application	Date of auction related to the contract indicated in this application (if applicable)
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Seller's name and postal address	Employer Identification Number
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Seller's telephone	Seller's Merchant's Registration Number
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Indicate the following information with respect to the contract and auction (if applicable) related to this application, as required by Tax Policy Circular Letters No. 15-09, 15-10 and 15-11 of June 24, 2015.

A. Information of the contract related to this application	
1. Detailed description of the tangible personal property covered by the contract included in this application.	Balance included in this application
2. Detailed description of the taxable services needed to carry out the contract included in this application (applies only to building projects).	Balance included in this application
3. Detailed description of the services rendered to other merchants or designated professional services subject to the 4% rate beginning on October 1, 2015, needed to carry out the contract included in this application.	Balance included in this application

B. Information of the auction related to the contract included in this application (if applicable)	
1. Detailed description of the tangible personal property.	Balance included in this application
2. Detailed description of the building project auction (submit schedule if necessary).	Status of the project and costs left to be incurred as of June 30, 2015

I hereby declare under penalty of perjury that the information contained in this form, schedules and documents attached has been examined by me and it is true, correct and complete and that the copy of the contract or auction included as a schedule to this form is a true and exact copy of the original document subscribed.

Name of purchaser, primary contractor or its authorized representative	Signature	Date
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NOTARY SEAL	Sworn and subscribed before me by _____, of legal age, _____ (civil status), _____ (occupation), and resident of _____, _____, personally known to me or identified by means of _____, in _____, _____, at _____, this ____ day of _____, ____.	Affidavit No. _____
	Title of the person who takes the oath	Signature of the person who takes the oath

Name of seller, secondary contractor or its authorized representative	Signature	Date
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NOTARY SEAL	Sworn and subscribed before me by _____, of legal age, _____ (civil status), _____ (occupation), and resident of _____, _____, personally known to me or identified by means of _____, in _____, _____, at _____, this ____ day of _____, ____.	Affidavit No. _____
	Title of the person who takes the oath	Signature of the person who takes the oath

Name of the owner of the building project (if applicable)	Signature	Date
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NOTARY SEAL	Sworn and subscribed before me by _____, of legal age, _____ (civil status), _____ (occupation), and resident of _____, _____, personally known to me or identified by means of _____, in _____, _____, at _____, this ____ day of _____, ____.	Affidavit No. _____
	Title of the person who takes the oath	Signature of the person who takes the oath

All applications may be presented at the Consumption Tax Bureau located at Mercantil Plaza Building, Ponce de León Ave., Stop 27½, San Juan, PR or mailed to: DEPARTMENT OF THE TREASURY, QUALIFIED CONTRACTS, PO BOX 9024140, SAN JUAN, PR 00902-4140.

Retention: Six (6) years.