



**VT Form**  
**SWT-608** **FRANCHISE TAX ON WASTE FACILITIES & COMMERCIAL HAULERS OF SOLID WASTE**

This return must be filed with payment within 30 days after the end of the calendar quarter. Copies of this return shall be filed with the Secretary of the Agency of Natural Resources at the same time or as otherwise required by the Secretary.

**Returns must be filed even if no tax is due.**


|   |                      |            |                                |                                  |
|---|----------------------|------------|--------------------------------|----------------------------------|
| Certified Facility / Licensed Hauler / Municipality |                      |            | Federal ID Number              |                                  |
| <b>OR</b>   | Individual Last Name | First Name | MI                             | <b>OR</b> Social Security Number |
| Mailing Address                                     |                      |            | Contact Person Name            |                                  |
| City  | State                | ZIP Code   |                                | Contact Person Telephone Number  |
| Email Address                                       |                      |            | <b>For Department Use Only</b> |                                  |

|                            |  |  |  |  |
|----------------------------|--|--|--|--|
| <b>Year being reported</b> | <b>Select return reporting period to be filed.</b>               |  |  |  |
|                            | <input type="checkbox"/> 1st Quarter, JAN - MAR<br>(due Apr. 30) | <input type="checkbox"/> 2nd Quarter, APR - JUN<br>(due Jul. 30) | <input type="checkbox"/> 3rd Quarter, JUL - SEP<br>(due Oct. 30) | <input type="checkbox"/> 4th Quarter, OCT - DEC<br>(due Jan. 30) |

| <b>(A) Month of</b> | <b>(B) Weight in Tons</b> |
|---------------------|---------------------------|
| <b>1a.</b>          | <b>1b.</b>                |
| <b>2a.</b>          | <b>2b.</b>                |
| <b>3a.</b>          | <b>3b.</b>                |

4. Total Tons (Add Lines 1b, 2b, and 3b) ..... **4.** \_\_\_\_\_
5. Tax Rate per Ton ..... **5.** \_\_\_\_\_ **6.00**
6. Tax Due (Multiply Line 4 by Line 5) ..... **6.** \_\_\_\_\_
7. If municipality, check here and enter 5% of Line 6. All others enter -0- ..... **7.** \_\_\_\_\_  
 Municipality
8. Total Tax Due (Line 6 minus Line 7) ..... **8.** \_\_\_\_\_
- Make check payable to **VERMONT DEPARTMENT OF TAXES**

I declare under the penalties of perjury, this return is true, correct, and complete to the best of my knowledge. If prepared by a person other than the taxpayer, his/her declaration further provides under 32 V.S.A. §§ 5901-5903 this information has not been and will not be used for any other purpose or made available to any other person other than for the preparation of this return unless a separate valid consent form is signed by the taxpayer and retained by the preparer.

|  |                                  |                          |  |   |
|--|----------------------------------|--------------------------|--|---|
|  | Signature of Responsible Officer | Date                     | Daytime telephone number (optional)<br>( ) | May the Dept. of Taxes discuss this return with the preparer shown?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|  | Printed name                     | Email address (optional) |  |   |

|                                 |   |  |   |
|---------------------------------|---|--|---|
| <b>Paid Preparer's Use Only</b> | Preparer's signature                                | Date                                   | Check if self-employed <input type="checkbox"/> |
|                                 | Preparer's printed name                             | Preparer's Social Security No. or PTIN |   |
|                                 | Firm's name (or yours if self-employed) and address |  |   |
|                                 | EIN   | Preparer's Telephone Number<br>( )     | Preparer's email address (optional)             |