

**KARRI THORSTEN
BENTON COUNTY AUDITOR-TREASURER
PO BOX 129
FOLEY, MN 56329-0129
(320) 968-5006 or (320) 968-5027**

AGGREGATE TAX REPORTING FORM

(Please type or print)

1. Name of Operator:

2. Address:

3. Reporting period covered by this report (check one):

_____ January 1-March 31, 2016	Due by April 14 th
_____ April 1-June 30, 2016	Due by July 14 th
_____ July 1-September 30, 2016	Due by October 14 th
_____ October 1-December 31, 2016	Due by January 14 th

SCHEDULE A

(Please complete the following schedule. Use additional sheets if necessary and attach to this form).

Name or Location of pit, quarry or deposit from which aggregate was removed (include parcel number):	Owner of pit, quarry or deposit:	Total cubic yards/tons removed:

Complete line 4 and/or line 5:

4. Total number of cubic yards of aggregate removed during this reporting period:
 _____ cubic yards x \$.215 = _____
Amount of Tax

5. Total number of tons of aggregate removed during this reporting period:
 _____ tons x \$.15 = _____
Amount of Tax

6. If any of the aggregate removed and reported above was shipped directly from the extraction site to a waterway, railway or other mode of transportation other than a highway, road or street, complete Schedule B.

SCHEDULE B

(Please complete the following schedule. Use additional sheets if necessary and attach to this form)

Name or Location of pit, quarry or deposit from which aggregate was removed (include parcel number)	Total cubic yards/tons removed:	Mode of Transportation	County of Original Destination

7. PLEASE REMIT TAX ALONG WITH THIS FORM.

Under penalties of perjury, I declare that I have prepared or have examined this reporting form, including accompanying schedules and statements, and to the best of my knowledge and belief this report is true and complete.

Signature

Title

Date

Mail this form and your remittance to:

Karri Thorsten
Benton County Auditor-Treasurer
PO Box 129
Foley, MN 56329-0129

Fax (320) 968-5337