

KAMAS CITY 3040 Tax Rate Summary Report 693	Form PT-693 pt-693.xls Rev. 09/10
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SUMMIT COUNTY

Tax Year: 2015

The Board of Trustees for the above special district has set the current year's tax rates as follows:

Purpose of Tax Rate (Code from Utah Code Annotated)	Auditor's Tax Rate	Proposed Tax Rate	Maximum By Law	Budgeted Revenue
10 General Operations §11-6-133	0.001847	0.001847	.007	\$214,962
Total Tax Rate	0.001847	0.001847	Total Revenue	\$214,962

Certification by Taxing Entity

I, _____, as authorized agent, hereby certify that this statement is true and correct and in compliance with all sections of the Utah State Code relating to the tax rate setting process.

Signature: _____ Date: _____

Title: _____ Telephone: _____

Mailing address: _____

July 07, 2015

Multiple Levy Proposed Tax Rate Valuation Summary Report 694A	Form PT-694A pt-694A.xls Rev. 12/07
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County: SUMMIT

Tax Year: 2015

Taxing Entity: 3040 KAMAS CITY

1. Value minus CDRA/SCME (from column 7 of Report 697)		\$126,000,070
2. Local assessed real and centrally assessed BOE adjustments		
a. Real property taxable value (from column 2 of Report 697)	\$108,837,151	
b. 3-Year real property BOE average rate	0.010658	
c. Real property BOE adjustment	\$1,159,986	
d. Centrally Assessed taxable value (from col. 4 of Rpt. 697)	\$10,356,857	
e. 3-Year centrally assessed BOE average rate	0.000000	
f. Centrally assessed BOE adjustment	\$0	
g. Total BOE adjustments	\$1,159,986	
3. Sum of valuations (line 2 less line3g)		\$124,840,084
4. Five-year average tax collection rate		91.38%
5. Proposed tax rate value (line 3 multiplied by line 4)		\$114,078,869

Certification by Taxing Entity

I, _____, as authorized agent, do hereby certify that the budgetary amount from property tax revenue listed above was adopted and approved in compliance with all requirements prescribed by law.

Certification by County Auditor

I, _____, as County Auditor, do hereby certify that I have examined the information submitted on this statement and have found it to be true and correct.

Signature: _____ Date: _____

Multiple Levy Proposed Tax Rate Worksheet Report 694B	Form PT-694B pt-694b.xls Rev. 12/07
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County: SUMMIT **Tax Year:** 2015
Entity Name: 3040 KAMAS CITY

A. Proposed tax rate value (line 5 of Report 694A) \$114,078,869

	1. Fund/Budget Type	2. Budgeted Revenue	3. Proposed Tax Rate
10	General Operations	\$214,962	0.001847
B. Total revenue (sum of column 2)		\$214,962	
C. Total proposed tax rate (sum of column 3)			0.001847

Certification by Taxing Entity

I, _____, as authorized agent, do hereby certify that the budgetary amount from property tax revenue listed above was adopted and approved in compliance with all requirements prescribed by law.

Certification by County Auditor

I, _____, as County Auditor, do hereby certify that I have examined the information submitted on this statement and have found it to be true and correct.

Signature: _____ Date: _____