

Oklahoma Volunteer Firefighter Tax Credit supporting documentation

2011

STATE LAW requires **all first-time participants** to apply for the **\$200** tax credit for their first year.
First year? If so, you should list eligible firefighter training taken in 2011 as well as those taken in previous years.
 If you have **previously completed a \$200 tax credit**, you **may be eligible for the \$400** tax credit, which has different requirements.

Recognizing the importance of volunteer firefighters and the challenges they face, Title 68 O.S. Section 2358.7 provides the opportunity to receive a tax credit for firefighter training.

Birth Date ▶

M	M	D	D	Y	Y	Y	Y
□	□	□	□	□	□	□	□

Your Information:

Print first name and middle initial _____ last name _____

Mailing address (include apartment number or rural route) _____

City, State and Zip _____

Daytime phone, with area code () _____ Evening phone, with area code () _____

Your e-mail address: _____

For **more information**, see instructions available at www.COFT-Oklahoma.org or call us at **(405) 601-8862**.

Please enter \$200 or \$400 on the applicable line for Firefighter Training Tax Credit on the 2011 Form 511CR on your Oklahoma state tax return. Then, transfer the totals of your tax credits to the applicable line for Other Credits on the 2011 Form 511.

Under penalties of perjury I declare the information presented here is true and correct to the best of my knowledge.
 In accordance with the Family Educational Rights and Privacy Act, I hereby give my permission for my information showing eligibility to be sent to OSU-Fire Service Training and COFT.

_____ Date **Signature of Volunteer Firefighter**

Departmental Affiliation (s):

Currently serving as a volunteer firefighter with: _____

Organizational address, including city and zip code: _____

Fire Chief cell phone number () _____ Fire Chief daytime phone number () _____

Fire Chief or Fire department's e-mail address: _____

List any other Fire Departments under which your training records may be listed.
 Department name(s) _____

Training:
 For your first year, you will need **12 hours** of eligible training. You can list training completed during **Tax Year 2011** and in previous years. If you have been previously approved you only need 6 hours of eligible training —**completed in 2011**. Please use the **Training Information Form** to list the training completed to apply for the tax credit. Attach training records and relevant certificates.

Please check the box of the tax credit for which you are applying:

I am applying for a \$200 tax credit, and this is my first year to apply for the volunteer firefighter tax credit.

I am applying for a \$200 tax credit (repeat applicant).

I am applying for a \$400 tax credit (must have prior \$200 tax credit form approved on file).

Please Check All That Apply

I am working towards my Volunteer Firefighter Practices or Higher Equivalent.

I have completed (year _____) Volunteer Firefighter Practices or Higher Equivalent.

I am working towards my Firefighter I or Higher Equivalent.

I have completed (year _____) Firefighter I or Higher Equivalent. (Please attach certificate if COFT does not already have on file.)

****** For Fire Chief Use ******

If \$200 credit. I verify that the above listed firefighter is a member in good standing with our department and has completed the submitted training for the dates indicated. The volunteer has been provided and participated in all annual training as required by federal and state authorities.

If \$400 credit. I verify that the above listed firefighter is a member in good standing with our department and has completed the submitted training for the dates indicated. The volunteer has been provided and participated in all annual training as required by federal and state authorities.

1. Make a copy for your files and department files, then **mail original to:**
COFT (Council on Firefighter Training)
 2716 NE 50th Street
 Oklahoma City, OK 73111

2. **ENTER YOUR SSN!** You must enclose the original of this **COFT approved** document attached to the Form 511EF or your tax return, then mail to the Oklahoma State Tax Commission:
OK Tax Commission
Mail return address PO Box 26800 Zip 73126-0800
E-File address PO Box 269060 Zip 73126-9060
 Oklahoma City, OK
 (405) 521-3160

_____ Date **Signature of Fire Chief**

_____ **Name of the Fire Chief, printed**

Based on the information provided by the firefighter and verified by the fire chief, COFT approves this firefighter for a training tax incentive for tax year 2011.

_____ Date **Authorized signature for COFT**

AFTER receiving your approved tax credit form, please enter your Social Security Number before mailing to the Oklahoma Tax Commission.

Social Security #

□	□	□	□	□	□	□	□
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Print Or Type

Please make a copy of approved form for your records

For Volunteer Firefighter use only.