



# APPLICATION FOR EXTENSION OF TIME TO FILE INDIANA EZB-R

State Form 50468 (R5 / 12-09)

Approved by State Board of Accounts, 2007

INDIANA ECONOMIC DEVELOPMENT CORPORATION (IEDC)

FORM EZB-E

**INSTRUCTIONS:**

1. This form is an application for an extension of time to file Indiana form EZB-R (Enterprise Zone Business Registration form). The Indiana Economic Development Corporation may grant an extension of not more than forty-five (45) days to file the EZB-R. A zone business must apply for an extension to the Board on this form **POSTMARKED NO LATER THAN June 1, 2010**.
2. Please return this form with **APPROVED** stamped on it, if approved for an extension by the IEDC.
3. Attach the approved extension to the EZB-R.
4. The EZB-R registration form and fees **MUST BE POSTMARKED NO LATER THAN July 15, 2010**. Failure to file this form or EZB-R in a timely manner may result in monetary penalty, denial of tax savings, and disqualification from the program.
5. Mail to:

Indiana Economic Development Corporation  
Indiana Enterprise Zone Program  
One North Capitol, Suite 700  
Indianapolis, IN 46204-2288

INFORMATION ABOUT THE APPLICANT			
Name of business		Federal Identification number	
Mailing address (number and street)			
City	State	ZIP code	
Zone address (number and street)			
Zone city	Zone state	Zone ZIP code	Telephone number (     )

TO BE COMPLETED BY THE APPLICANT	
1. Total expected tax savings for calendar year 2009	\$
2. Total fee you expect to owe the state this year	\$
3. Total estimated new capital investment for calendar year 2009	\$
4. Was an EZB-R filed last year <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, is this a first time filing? <input type="checkbox"/> Yes <input type="checkbox"/> No

CERTIFICATION	
Under penalties of perjury, I (we) declare that to the best of my (our) knowledge and belief, the statements made herein are true and complete.	
Signature of firm or corporate officer	Title
Name of firm or corporate officer (please print)	Date (month, day, year)