## SMM 2% Rental Electronic Filing Request For Access 42-3-107 (16) C.R.S.

Company Information			
Company Name			
Business Address			
City			ZIP Code
nty where SMM is registered: <b>OR</b> Check here if <b>Registration</b> I			Exempt
Contact Information			
Contact Name			Phone
Email Address			
Taxpayer Information			
Taxpayer Type, please check one:			
Corporation Fiduciary	Government	Limited L	iability Limited Partner
Limited Liability Partnership		Non-Pro	fit 501
Partnership     Unknown			
FEIN Sales Tax ID		Month for Initial Filing Period	
<ul> <li>Please attach copies of the following:</li> <li>Approved DR 0160 Permit to Collect Sales Tax on the Rental or Lease Basis</li> <li>Approved DR 2091 Special Mobile Machinery 2% Specific Ownership Tax Authorization Request</li> <li>or</li> <li>Approved DR 2192 SMM 2% Registration Exempt and SOT Authorization Request</li> </ul>			
Submit this form along with the DR 0160 and DR 2091 to one of the following:			
• 2% Rental program: DOR_VehiclePortal@state.co.us			
2% Registration Exempt: DOR_DMV_SMMExempt@state.co.us			
Department Use Only			
Login ID	SMM Account Number		
Password	Data Account Added		
Mailing Address: Colorado Department of Revenue Vehicle Services Unit P.O. Box 173350 Denver, CO 80217-3350	Physical Address: Colorado Department of Revenue Vehicle Services Unit 1881 Pierce Street Lakewood, CO 80214		

You will be contacted via email for any questions or concerns.