



For EZ credit:
please call 530/741-6463



1364 SKY HARBOR DRIVE, MARYSVILLE, CA 95901 WWW.YUBASUTTEREZ.COM

STATE HIRING TAX CREDIT VOUCHER
EMPLOYEE QUALIFICATION APPLICATION
SUBMITTAL REQUEST

To be completed by employer/consultant:

Business Name: _____

Federal Tax ID#: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Contact: _____

Email: _____

If submitted by consultant, please complete:

Consultant: _____

Address: _____

City: _____ State : _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____ Contact: _____

voucher applications _____ x \$10 each = Total Submitted: \$ _____

*Please make check payment to: County of Yuba
(The \$10 is a state legislated fee that is transmitted directly to the state)*

For Zone Use:

Date Received: _____

By: _____