

CITY OF DELTA

SALES AND USE TAX LICENSE APPLICATION

1. Is this an application for a (CHECK ONE): Permanent business location
 Temporary or door-to-door business
(IF TEMPORARY INDICATE DATES OF OPERATION): From _____ To _____

2. Estimate of monthly taxable sales: \$ _____

3. Number of employees within the municipality: _____

4. Type of ownership: Individual/Proprietorship Partnership Corporation
 Association/Club Other (PLEASE SPECIFY)

5. Federal Employer Identification Number or Social Security Number: _____

6. License to be issued in the name of (LIST FULL LEGAL NAME OF INDIVIDUAL/PROPRIETOR, PARTNERSHIP, CORPORATION, OR ASSOCIATION/CLUB): _____

7. Trade name (d/b/a): _____

8a. Mailing Address: _____
Street City State Zip Code

8b. Business is conducted at: _____
Street City State Zip Code

8c. Business phone number: () _____ 8d. Business fax number: () _____

8e. Is your business located in a: Commercial establishment Private residence
 Other (PLEASE SPECIFY)

9. Name all principal owners or officers:

Name	Home address	Home phone

Title	_____	

Name	Home address	Home phone

Title	_____	

Name	Home address	Home phone

Title	_____	

(PLEASE COMPLETE REVERSE SIDE OF APPLICATION)

10. Date you began or will begin business activity in the municipality:

11. List product that you sell or service that you provide *(PLEASE BE SPECIFIC)*:

12. Landlord: _____
Name Address Phone

13. Accountant: _____
Name Address Phone

14. Location of business records: _____
Address Phone

A. This application for a Sales and Use Tax License will be rejected if all questions are not fully answered.

B. This application for a Sales and Use Tax License will be rejected if it is not accompanied by a \$10.00 license fee.

C. This is only a sales and use tax license application form. The submission of a completed version of this form and issuance of a Sales and Use Tax License may be only one of the steps that you must complete before you are legally authorized to engage in business in the Municipality. It is your responsibility to contact the Municipality and assure that you have complied with all applicable legal requirements in addition to obtaining a Sales and Use Tax License prior to engaging in business in the Municipality.

15a. Signature of applicant: _____ 15b. Date:

15c. Print name and title of signature of applicant: _____

OFFICE USE ONLY
(DO NOT WRITE IN THIS SPACE)

LICENSE NUMBER: _____ DATE OF ISSUANCE:

INDUSTRY: _____ GEOGRAPHIC: _____ FILING FREQUENCY: