



Application for Louisiana Revenue Account Number

P.O. Box 201
Baton Rouge, LA 70821-0201
(225) 219-7318

For office use only.

Date of application

- 1. A. Sales/ Use
B. Withholding
C. Vehicle Rental Excise
D. Severance
E. Oil and Gas Classification
F. Other

- 2. Reason for applying
A. Started new business
B. Purchased ongoing business: Name of previous owner
C. Other (specify)

- 3. Indicate the account number you use for each tax filed with the Louisiana Department of Revenue.
LA Corp. Tax Number None
LA Sales Tax Number None
LA Excise Taxes Number None
LA Withholding Tax Number None
LA Severance Tax Number None
LA Natural Resource Number None

- 4. A. Legal name(s)
B. Trade name of business Telephone

- 5. A. Business location address (NO P.O. Box or General Delivery)
B. City and state
C. ZIP

- 6. A. Address for receiving tax forms and correspondence (If same location, write "same").
B. City and State
C. ZIP
D. Telephone
E. Additional mailing address(es) attached

- 7. Type of organization: A. Individual B. Partnership C. Corporation D. Governmental E. Nonprofit F. Other

- 8. U.S. NAICS Code (required)
9. Federal Employer ID Number None

- 10. If sole owner (individual): Name SSN
Home address Telephone

- 11. If corporation or partnership: name, title, Social Security Number, home address, and telephone number of officers or partners

- 12. A. Louisiana Charter Number (if known)
B. State of incorporation (if not Louisiana)

- 13. Permits -Sellers of liquor, beer, or wine (wholesale or retail), must obtain a permit from the Office of Alcohol and Tobacco Control. A permit from the Louisiana State Police Gaming Division must be obtained by sellers of lottery tickets or operators of video poker games. Indicate permit number(s) that you currently hold.
A. Lottery Permit Number B. Expiration Month/Year
Alcohol Permit Number Expiration Month/Year
VPG Permit Number Expiration Month/Year

- 14. A. Corporation Income/Franchise: Date charter filed with Louisiana Secretary of State
15. Sales or Use Tax: Date business begins sales operations from this location
16. Withholding Tax: (See instructions.) Select filing frequency. quarterly monthly semi-monthly
17. Severance Tax: Select filing frequency. quarterly monthly 45-day

18. Description of business: (required)
I affirm that the information given on this application is true and correct.
Signature of applicant Title
Signature of preparer Date (mm/dd/yyyy)

