

WITHHOLDING AND BUSINESS REGISTRATION

FEDERAL IDENTIFICATION NO. _____

NAME OR CORPORATE NAME _____

BUSINESS OR TRADE NAME _____

STREET ADDRESS _____

CITY, STATE AND ZIP CODE _____

CHECK ONE - SOLE PROPRIETORSHIP _____

PARTNERSHIP _____

CORPORATION _____

NON - PROFIT CORP. _____

ESTATE OR TRUST _____

GOVERNMENTAL _____

UNION _____

WILL YOU BE WITHHOLDING MORE THAN

\$100.00 PER MONTH IN CITY TAXES? _____ YES _____ NO

NUMBER OF EMPLOYEES _____

TYPE OF BUSINESS (MFG. COMMERCIAL, ETC.) _____

DATE BUSINESS STARTED _____

FISCAL PERIOD ENDING MONTH. _____

NAME OF PERSON RESPONSIBLE FOR FILING FORMS _____

_____ TITLE _____

TELEPHONE NUMBER () _____

SIGNATURE _____ DATE _____