

REQUEST FOR TAX STATUS

For the Department of Revenue to release tax status information, this form must have an authorizing signature from the taxpayer as follows:

- □ Sole Proprietor Signature of sole proprietor.
- ☐ Partnership Signature of any one of the partners.
- □ Corporation Signature of one of the corporate officers such as:
 - President
 - Vice President
 - Treasurer

Complete the Following:

TAXPAYER INFORMATION			
ame of Business:	UBI/Tax Reporting Acc	count Number:	
Address:			
(Street)	(City)	(State)	(Zip Code)
none Number:	Fax Number:		
Authorization to release information	tion (see instructions on back.)		
Signature:	Title:		
Print Name:	Date:		
AILING INFORMATION (If inform	nation to be sent to someone other than tax	payer)	
ame:	Business Name:		
ddress:			
(Street)	(City)	(State)	(Zip Code)
hone Number:	Fax Number:		

MAIL OR FAX THIS FORM TO:

Tax Status Desk Department of Revenue Taxpayer Account Administration PO Box 47476 Olympia, WA 98504-7476

Fax: (360) 586-0527

For tax assistance visit dor.wa.gov or call 1-800-647-7706. To inquire about the availability of this document in an alternate format for the visually impaired, please call (360) 705-6715. Teletype (TTY) users may call 1-800-451-7985.

REQUEST FOR TAX STATUS

Request for tax status letters must be in writing.
There is no charge for tax status letters.
 Request must include the following information: Tax reporting account number Name of business Phone number for questions. Address to mail letter Fax number if the taxpayer requests the completed letter to be faxed.
For the Department of Revenue to release tax status information, the request must have an authorizing signature from the taxpayer as follows:
Sole Proprietor – Signature must be from the sole proprietor. Partnership – Signature must be from any one of the partners. Corporation – Signature must be from one of the corporate officers such as: President Vice President Treasurer The name and title should be typed or printed under the authorized signature.
For tax status letters to be sent to someone other than the taxpayer, the following information must be included: • Contact Name • Business • Address • Phone Number • Fax Number
Requests can be faxed or mailed to the following address: Tax Status Desk Department of Revenue Taxpayer Account Administration PO Box 47476 Olympia, WA 98504-7476 Fax: (360) 586-0527