



DEPARTMENT OF REVENUE  
TAX INQUIRY STATEMENT

You may use this form as a guide to request a written response to your tax inquiry. You may leave this form with a Department of Revenue employee or mail your question to the address below.

Date: \_\_\_\_\_ Year: \_\_\_\_\_

1. My name is: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Tax Registration/UBI No.: \_\_\_\_\_  
Email Address: \_\_\_\_\_

2. My question is (give detailed information about your request. If more space is needed, please attach additional sheets to this form).

Taxpayer Services  
PO Box 47478  
Olympia, WA 98504-7478  
**Fax: (360) 705-6655**

You can expect a reply within 10 working days **if the taxpayer in question is identified.**

For tax assistance or to request this document in an alternate format, visit <http://dor.wa.gov> or call 1-800-647-7706. Teletype (TTY) users may use the Washington Relay Service by calling 711.