License Application For Out-of-State Vendors

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FEIN Number	er SSN of owner, officer or agent responsible for taxes				
				_	
Legal Name of Entity owner			Trade name if different		
Mailing Address - Number and street					
City / town			State	ZIP code	
Telephone number					
Type of ownership: Sole proprietorship Non-Maryland corporation Will you have employees with was Yes No			ning services in Maryl	and?	
Describe business activity which o	generates revenue:				
Identify owners, partners, corpora	ate officers				
Name	Title		Address	Telephone number	
To register for Maryland incomtaxes File a Combined Registra	ne tax withholding, unemploymen otion Application (COM/RAD - 093	nt insurance, B) online at w	admissions and amus	sement, tire fee, or motor fuel	
If you don't have a federal employer to Central I	ployer ID number when you subn Registration when you receive it i			uired, leave the space blank and	
Central Registration Revenue Administration Cer 110 Carroll Street Annapolis, Md. 21411-0001	,				
For questions, call Call Taxpayer			88-2937, Maryland Re	lay Service 711.	
Maryland tax forms are available Under penalties of perjury, I deck and complete.	•		e best of my knowledg	e and belief it is true, correct	
and complete.			Make checks payable Comptroller of Mary SUT, Revenue Admi PO Box 17405 Baltimore, Maryland	/land nistration Division	
Taxpayer or Agent's signature	Date	1	or fax this application to: Central Registration at 410-260-7908		