

Louisiana Sales and Use Tax Commission for Remote Sellers

Application

Reason for Applying:

_____ I am currently a Direct Marketer and qualify as a Remote Seller.

_____ I am currently a Direct Marketer, but elect to file as a Remote Seller. I do not qualify as a Remote Seller because (explain) _____.

If checked _____ above, my current Direct Marketer account number is _____

_____ I qualify as a Remote Seller and have never registered as a Direct Marketer in Louisiana to remit sales tax.

Legal Name _____

Trade Name/DBA _____

Federal ID Number _____ NAICS Code _____

Type of Organization
__ Sole Proprietor __ Corporation __ Nonprofit
__ Partnership __ LLC __ LLP __ LP

Date of Incorporation _____ State of Incorporation _____

Physical Address
City _____ State _____ Zip _____

Mailing Address
City _____ State _____ Zip _____

Location of Accounting Records
City _____ State _____ Zip _____

Agent for service of process _____

Telephone Number: (____) _____

Physical Address
City _____ State _____ Zip _____

Contact Person _____ Title _____

Contact's Telephone Number _____ Contact's Email Address _____

If sole owner/proprietor: Name: _____ Last 4-digits of SSN: _____

Telephone Number: _____ email: _____ xxx-xx-____

Address _____ Telephone: _____
City _____ State _____ Zip _____

If corporation, LLC, LLP, LP or partnership: Name, title, social security number, home address and telephone number of officers, members, managers, or partners.

Name: _____ Title: _____ Telephone _____

Address: _____ Last 4-digits of SSN: _____

_____ City _____ State _____ Zip _____ xxx-xx-____

Add Additional: _____

Website _____

What tangible personal property or services are sold in Louisiana? _____

What type of sales are made into Louisiana?

_____ Wholesale Sales _____ Retail Sales _____ Member Only Sales
_____ Other: _____

Description of business activity: _____

Food/Beverage Sales _____ Firearm Sales _____ Tobacco Products _____

Are your sales derived from any other manner of marketing other than through your website? _____

If yes, describe: _____

Do you sell on another entity's website? _____

If yes, list all other websites: _____

Please check all the items that apply to your company's business activities in Louisiana. If none of these items pertain to this business, select "None of the Above".

_____ Maintains a place of business in Louisiana, such as an office, agency, warehouse, showroom, retail outlet, manufacturing plant, etc.

_____ Has an employee or independent representative in Louisiana, or one that travels into Louisiana for any reason, including (but not limited to) installations, training, sales calls, etc., such as a salesman, sales representative, manufacturer's representative, contactor, agent, installer, repairmen, etc.

_____ Delivers merchandise into Louisiana by company-owned vehicle, leased vehicle, or by any means other than common carrier or the U.S. Postal Service.

_____ Leases or rents tangible personal property in Louisiana.

_____ Contracted to make improvements to real property in Louisiana

_____ Holds title to any real property, or moveable property stored, used, or kept in Louisiana.

_____ Corporation files as part of a Federal consolidated group for income tax purposes. If so, please attached a list of all corporation names filing within the consolidated return.

_____ Company meets other requirements to file sales or use taxes in Louisiana:

- Company will or has met economic nexus thresholds (\$100,000 Gross Sales/200 or more transactions).
- Company meets other filing requirements: _____

_____ Have ever been registered with any other taxing authority or collector in Louisiana. If checked, provide who, when, etc.

_____ *(Reserved for future use.)*

_____ None of the above.

Application Authorization

Name _____ Title _____

Signature of Applicant _____ Date _____