



BALDWIN COUNTY
Sales & Use Tax Application
 P.O. Box 189
 Robertsdale, AL 36567
www.baldwincounty.gov

251.928.3002
 251.943.5061
 251.937.9561
 FAX 251.972.6836

New Application or Updated for County Tax ID - Required *

Federal Tax ID # or Sole Proprietor, need SS#

Corporation or Sole Proprietorship Name

Business Name (dba)

Mailing Address

City County State Zip Code

Business Phone Ext. Other Phone Business Fax

Email Address Number of Locations in Baldwin County

Physical Address Location(s) of Business (Add additional pages if deemed necessary to provide requested information.)

1) Phone

2) Phone

3) Phone

**** Requires A Copy of the Driver's License for each owner/officer/managing member of the business listed.**

** Owner / Officer / Managing Member and Title	Physical Home Address	SS#	D/O/B	Phone
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

*** Requires** a recorded copy of the Articles of Corporation or Organization before a Tax ID Number can be assigned.

Type(s) of Business:

- Manufacturer
- Wholesaler
- Retailer
- Contractor
- Other - list below

Other

Type(s) of Organization:

- C Corporation *
- S Corporation *
- LLC *
- LLP *
- Partnership *
- Sole Proprietorship

Sales Method:

- Mail Order
- Salesman
- Commission

Payment Method:

- Check by Mail
- E-File

N/C

To be assigned by Sales Tax Dept.

Delivery Method:

- Common Carrier
- Customer Pickup
- Own Vehicle

Tax Liability:

- Consumer Use
- Motor Fuel
- Sellers Use
- Sales
- Tobacco
- Video Rental
- Rental / Lease
- Beer / Wine

Filing Status:

- Monthly (If other than monthly with Alabama Department of Revenue (ADOR), please attach ADOR's authorized filing letter when returning this form)

Explain in detail the type of activity conducted and / or product sold in Baldwin County:

Date your business began or will begin doing business in Baldwin County

Print Name of Contact Person Title Phone

By signing in the field below, I am certifying that this application, including any accompanying documents, has been examined by me and is to the best of knowledge, an accurate and complete application for the business or individual named on the application.

Signature of owner/officer/managing member * Date *