

Application for Business Entity

Type of Entity: Single Member LLC Multi Member LLC S-Corporation C-Corporation

Select Tax Types: General Excise Tax Withholding Tax Transient Accommodation Tax

GET/TAT Filing Frequency: Semi-Annual Quarterly Monthly

NOT OPTIONAL
If the first choice is not available with the DCCA, please provide two alternative business names.

Name of New Entity: _____
 Second Name Choice: _____
 Third Name Choice: _____

For Limited Liability Companies, the name must contain the abbreviation LLC, L.L.C. or the words Limited Liability Company.
For Corporations, the name must contain the abbreviation Inc., Corp., Ltd., or the words Corporation, Incorporated or Limited.

Mailing Address: _____

Physical Address: _____

Business Start Date: _____ Accounting Method: Cash Accrual Email: _____

Business Phone: _____ Nature of Business: _____ Business Activity: _____

List of all sole proprietors, partners, members or corporate officers:

<input type="checkbox"/> FEIN <input type="checkbox"/> TIN <input type="checkbox"/> SSN	Name (Individuals – Last, First, MI)	Title	Address
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

OFFICE USE ONLY

	Date Submitted	Date Accepted
Articles Submitted	_____	_____
Employer Identification Number	____-__-_____	_____
GE/TA	_____	____-__-____-__-____
Corpex book ordered	_____	_____
File Completed	_____	_____