



# APPLICATION FOR TAX STATUS REPORT

DATE RECEIVED: \_\_\_\_\_  
TSA NUMBER: \_\_\_\_\_  
AUDITOR: \_\_\_\_\_

**Mail to:** NYC Dept. of Finance, Collections Division, Tax Status, 59 Maiden Lane, 28th Floor, New York, NY 10038

**Instructions:** Please complete and sign this application before mailing to the address above. See below for further details.

## SECTION I - APPLICANT'S INFORMATION

Applicant's Name: \_\_\_\_\_ Taxpayer's Email Address: \_\_\_\_\_  
PRINT FIRST NAME PRINT LAST NAME

Applicant's Address: \_\_\_\_\_  
NUMBER AND STREET APT/STE  
City and State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country (if not US): \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Name of Subject Corporation: \_\_\_\_\_

Subject Corporation's Address: \_\_\_\_\_  
NUMBER AND STREET APT/STE  
City and State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country (if not US): \_\_\_\_\_ Telephone Number: \_\_\_\_\_

State or County of Incorporation: \_\_\_\_\_ Date of Incorporation: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Business Began (in NYC): \_\_\_\_/\_\_\_\_/\_\_\_\_

## SECTION II - CERTIFICATION

*I certify that the statements made herein have been examined by me and are, to the best of my knowledge and belief, true, correct and complete.*

Please sign and date:

\_\_\_\_\_  
Signature DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

RELATIONSHIP TO CORPORATION (Check one):  REPRESENTATIVE (see instructions)  OFFICER

## INSTRUCTIONS FOR TAX STATUS REPORT

All Sections of this application must be completed in its entirety.

### Fees:

There is a \$5.00 processing fee. Please make check or money order to the New York City Department of Finance and mail to the address below. This processing fee is non-refundable.

### Power of Attorney:

Submit a fully-executed Power of Attorney form with the application. This must be submitted by any authorized representative of the subject corporation requesting the tax status report. Incomplete applications will not be accepted.

### Mailing Address:

Mail this completed application, the \$5.00 processing fee and completed Power of Attorney form (if applicable) to:

**NYC Department of Finance  
Collections Division, Tax Status  
59 Maiden Lane, 28th Floor  
New York, NY 10038**

If you have any questions, call Tax Status at (212) 291-4415.