_____

Update Business Taxes and Fees

Business Name: _____   Business Account Number: _____

Complete this form to declare if there is a San Francisco Business Tax or Fee that does or does not apply to the business listed above. This form cannot be used to claim that some or all of your services are exempt from the selected business tax.

For information regarding San Francisco Business Taxes or Fees and other requirements, go to: http://sftreasurer.org/business and click on More Taxes & Fees tab.

To update your business account information including the business contact information, add or close a location, or close your business, go to: http://sftreasurer.org/account-update

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ADD OR REMOVE SAN FRANCISCO TAXES & FEES:

If adding a tax or fee, effective date for the applicable tax or fee (no future date): _____

If removing a tax or fee, end date for the tax or fee if no longer applicable: _____

Location identification number (LIN): _____

To find your LIN, go to: https://etaxstatement.sfgov.org/situslookup

Select the taxes & fees needing the update:

☐ Transient Occupancy Tax   ☐ Parking Tax   ☐ Utility Users Tax
☐ Tourism Improvement District Fee ☐ Access Line Tax   ☐ Stadium Tax
☐ Moscone Expansion District Fee   ☐ Telephone Users Tax   ☐ Sugary Drinks Tax
☐ Cigarette Litter Abatement Fee

Mail this form to: Office of the Treasurer & Tax Collector, P.O. Box 7425, San Francisco, CA 94120-7425

Declaration

I certify under penalty of perjury that I am the taxpayer (including an officer, general partner, member manager, executor, trustee, fiduciary, or other individual with the authority to bind the taxpayer), or an agent of the taxpayer authorized to sign this form on behalf of the taxpayer pursuant to a validly executed Power of Attorney, and I have examined the foregoing, and the information thereon is, to the best of my knowledge and belief, true and correct, and fully compliant with all the requirements provided in the San Francisco Business and Tax Regulations Code.

Name & Title: _____   Signature: _____

Date: _____   Telephone: _____   Email Address: _____

Rev. 9/13/18