



Department of Taxation

P.O. Box 182215
Columbus, OH 43218-2215
(888) 405-4089



07100100

UT 1000 Rev. 8/19
**Out-of-State Sellers
and/or Marketplace
Facilitator Registration**

Account no.
(For department use only)

Federal employer identification no.

Social Security no. / ITIN

Ohio corporate charter no.

1. Check type of ownership: (10) Sole owner (20) Partnership (30) Corporation (150) Nonprofit
(50) LLC (70) LLP (80) LTD Other (please specify) _____

2. When did you or will you begin providing taxable sales in the state of Ohio? (MM/DD/YY) _____

3. Is this license for a marketplace facilitator as defined in Ohio Revised Code 5741.01(T)? Yes No

4. Provide NAICS code and state nature of business activity _____
(For the most current listings, search NAICS on our Web site at tax.ohio.gov.)

5. Legal name _____
(Corporation, sole owner, partnership, etc.)

6. Trade name or DBA _____

7. Primary address _____
Address of corporation, sole owner, partnership, etc. City State ZIP code

Business phone no. Fax no. Secondary phone no.

8. Mailing address _____
(If different from above) City State ZIP code

9. If you operate as a corporation or partnership, list appropriate names, addresses and identification numbers below.

Title Name Street City State ZIP code SSN / ITIN / FEIN

Title Name Street City State ZIP code SSN / ITIN / FEIN

Title Name Street City State ZIP code SSN / ITIN / FEIN

10. Name, phone number, fax number and e-mail address of individual the department should contact regarding this account.

Name Phone no. Fax no. E-mail address

I hereby declare that this form has been examined by me and to the best of my knowledge and belief is true, correct, and complete.

Date Signature of applicant

Mail to the address above.

Federal Privacy Act Notice

Because we require you to provide us with a Social Security number, the *Federal Privacy Act of 1974* requires us to inform you that providing us with your Social Security number is mandatory. Ohio Revised Code sections 5703.05, 5703.057 and 5747.08 authorize us to request this information. We need your Social Security number in order to administer this tax.