	Addi	Utah State Tax 10 N 1950 W • SLC, UT tional Busin or a Sales Ta	84134 • tax	ocations		<b>C-69B</b> Rev. 5/24
	➡ Do it	<b>all online:</b> File ar Manag	nd pay you le your acc		TAXPAYER A	AP CCESS POINT
1 — General Information						
		dentification Numbo				
	T C					
1c. Name of Legal Entity - PRINT If you are a sole proprie	etor, write your name	here	Daytime p	hone number	Cell phone r	number
Legal entity's street address City		County	State	Foreign country (if	not U.S.)	ZIP Code
Legal entity's mailing address City		County	State I	Foreign country (if	not U.S.)	ZIP Code
Business website address (URL)		Email address				
<ul> <li>Mark "yes" for each question below that applies to any a.</li> <li>a. Will you have sales of grocery food?</li> <li>b. Will you sell motor vehicles, aircraft, watercraft, m or mobile homes in municipalities imposing the restate correctional facility tax?</li> </ul>	anufactured hom sort communities	nes, modular home s tax or the	S			
c. Will you have retail sales of new tires?		] Yes 🗌 N	0			
<ul><li>d. Are you a restaurant?</li><li>e. Will you offer rentals of motor vehicles (12,000 po vehicles for 30 days or less?</li></ul>	ounds or less) or	off-road/recreation	al	] Yes 🗌 N ] Yes 🗌 N	0	
If yes, what type(s) of vehicles will you rent?	ons			eational vehicl	es	
<b>DBA/Business Name</b> Business or trade name at this physical loca		ness start date for this lo	cation	Offic	e Use Only	
Physical street address of business (P.O. Box not acceptable)		Business telephone number		County		
City County Required: Local Utah government issuing business license for this loca	State	ZIP code	Cit	y Code		
Business Description If business or product is different from main business location, describe here for this location			ו ו	C Code		
Lodging Services: Will you provide motel, hotel, trailer court, campgro	ound or other lodging	services at this location?	?	NAICS	V d.T	e. F f. L

<b>DBA/Business Name</b> Business or trade name at this physical location		Business start date for this location		Office Use Only		
Physical street address of business (P.O. Box not acceptable)		Business telephone number		County		
City	County	State	ZIP code	City Code		
Required: Local Utah government issuing business	SIC Code					
Business Description If business or product is diffe						
	NAICS					
Lodging Services: Will you provide motel, hotel, trailer court, campground or other lodging services at this location?				a.G b.X c.W d.T	e. F f. L	
DBA/Business Name         Business or trade name at this physical location         Business start date for this		start date for this location	Office Use Onl	y		
Physical street address of business (P.O. Box not acceptable)		Business telephone number		County		
City	County	State	ZIP code	City Code		
Required: Local Utah government issuing business	SIC Code					
Business Description If business or product is different from main business location, describe here for this location						
	NAICS					
Lodging Services: Will you provide motel, hotel, tra	a.G b.X c.W d.T	e. F f. L				

3 — Authorized Signature	
Signature of Authorized Applicant or Owner (Application will not be accepted without original signature)	Date
SIGN H <u>ERE</u>	

## **Additional Business Locations for Sales Tax Accounts**

## **General Information**

Use this form to register additional business locations for a new or existing sales tax account.

Do not use this form to register new cigarette, tobacco or e-cigarette outlets.

Instead, login to tap.utah.gov and use form TC-69, or scan this QR Code and follow the instructions:

## Instructions

- 1a. You must provide a valid Social Security Number or Federal Employer Identification Number.
- 1b. If you are already registered with the Tax Commission and you are adding locations to an existing sales tax account, you must also provide your Sales Tax Account Number.
- 1c. You must provide the legal entity's name, daytime phone number, cell phone number, street address (PO Box not acceptable), mailing address, website and email.
- 2. You must provide all information for each location:
  - DBA/business name
  - Business telephone number
  - · Business physical street address, city, county, state and Zip Code
  - · Local government issuing business license
  - Business description, if business or product is different than at the main business location

3. An authorized applicant or owner must sign this form.

Return the completed form to the Tax Commission at the following address:

Master Records Utah State Tax Commission 210 North 1950 West Salt Lake City, UT 84134-3310

Or fax to: 801-297-3573

