

Ohio Department of  
**TAXATION**

P.O. Box 182215 Columbus Ohio 43218-2215  
www.state.oh.us/tax/

To The County Auditor of

\_\_\_\_\_ county

PRESCRIBED SALES TAX FORM NO. ST 1 (Rev. 7-01)

License Issued by County Auditor

**APPLICATION FOR VENDOR'S LICENSE TO MAKE TAXABLE SALES**

Please print. Federal Employer Identification Number [ ] Social Security Number [ ] Ohio Corporate Charter Number [ ]

If you are a Foreign Corporation, give Ohio Certificate Number. Ohio Certificate Number [ ]

If you file under cumulative return authority, what is your Master Number? Master Number [ ]

1. Check type of ownership: (10) Sole Owner [ ] (20) Partnership [ ] (30) Corporation [ ] (40) Association [ ] (50) LLC [ ] (60) Fiduciary [ ] (70) LLP [ ] (80) LTD [ ] (100) Business Trust [ ]

2. When did you or will you start making taxable sales at this location? Date \_\_\_\_\_

3. Provide NAICS Code and state nature of business activity. NAICS Code [ ] See page 2.

4. Legal name \_\_\_\_\_ (Corporation, Sole Owner, Partnership)

5. Trade Name or DBA \_\_\_\_\_

6. Primary address \_\_\_\_\_ (Residence or Home/Office Address of Corporation) City State zip code (home/office phone no) (home/office fax no.)

7. Business location \_\_\_\_\_ (business phone no.)

8. Mailing address \_\_\_\_\_ (if different than above) city state zip code

9. How much sales tax do you expect to collect each month? (06) Less than \$200 [ ] (01) \$200 or greater [ ]

10. List previous owner (s) name, address and vendor's license number(s). Vendor's License No. [ ]

11. Will you be selling beer, wine or liquor at this location? Yes [ ] No [ ] If yes, list your Dept. of Liquor Control permit class, number and Employer Withholding Account No. [ ]

12. Do you intend to make non-liquor sales prior to the issuance of your permit? Yes [ ] No [ ]

13. If you operate as a corporation or partnership, list appropriate names, addresses and social security numbers below. Social Security Number [ ] Social Security Number [ ] Social Security Number [ ]

NOTE: The County Auditor shall not issue vendor's license until all questions pertaining to the applicant on this application are answered. Application and payment of the \$25.00 fee are to be forwarded to the auditor of the county in which the sales are to be made.

I hereby declare the above to be true and correct to the best of my knowledge and belief

date signature of applicant or agent county auditor by deputy