



ACCOUNTING & TAX SERVICE, LLC

132 Joe Knox Avenue, Suite 104
 Mooresville, NC 28117
 Office: 704-761-TAXS
 Fax: 980- 206-0635
 denise@denisehatcher.com

EIN Summary of your information for a new application.

Organization Information:

Organization Type: \_\_\_\_\_ Tax Entity Classification Type: \_\_\_\_\_

Legal name: \_\_\_\_\_

County: \_\_\_\_\_ State/Territory: \_\_\_\_\_

Start date: \_\_\_\_\_ State/Territory where articles of organization are (or will be) filed: \_\_\_\_\_

Addresses

Physical Location: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Responsible Party

Name: \_\_\_\_\_ Position: \_\_\_\_\_

SSN/ITIN: \_\_\_\_\_

Employee Information

Date wages or annuities will be paid: \_\_\_\_\_ Number of agricultural employees: \_\_\_\_\_

Number of other employees: \_\_\_\_\_ Tax Liability of \$1000 or less during calendar year: \_\_\_\_\_

Principal Business Activity

What your business/organization does: \_\_\_\_\_

Principal products/services: \_\_\_\_\_

Additional LLC Information

Owns a 55,000 pounds or greater highway motor vehicle: \_\_\_\_\_

Involves gambling/wagering: \_\_\_\_\_ Involves alcohol, tobacco or firearms: \_\_\_\_\_

Files Form 720 (Quarterly Federal Excise Tax Return): \_\_\_\_\_ Has employees who receive Forms W-2: \_\_\_\_\_

Reason for Applying: \_\_\_\_\_