

# Corporate Tax Identification Number Registration Document

This document is for official corporate tax registration purposes. Please print and complete all fields in block letters.

## 1. Entity Information

Legal Business Name:	<input type="text"/>
Trade Name / DBA (if applicable):	<input type="text"/>
Entity Type (e.g., LLC, Corporation, Partnership):	<input type="text"/>
State / Country of Incorporation:	<input type="text"/>
Date of Incorporation (YYYY-MM-DD):	<input type="text"/>
Principal Business Activity:	<input type="text"/>

## 2. Business Addresses

### Registered Physical Address

Street Address:	<input type="text"/>
City:	<input type="text"/>
State / Province / Region:	<input type="text"/>
ZIP / Postal Code:	<input type="text"/>
Country:	<input type="text"/>

### Mailing Address (if different)

Mailing Address:	<input type="text"/>
City:	<input type="text"/>
State / Province / Region:	<input type="text"/>
ZIP / Postal Code:	<input type="text"/>

## 3. Contact Details

Primary Contact Person Name:	<input type="text"/>
Contact Person Title:	<input type="text"/>
Phone Number:	<input type="text"/>
Email Address:	<input type="text"/>

## 4. Authorization & Declaration

I hereby certify that the information provided on this registration document is, to the best of my knowledge, true, correct, and complete.

Name of Authorized Representative:	<input type="text"/>
Title of Authorized Representative:	<input type="text"/>
Signature (Write 'SIGNED' if electronic):	<input type="text"/>
Date (YYYY-MM-DD):	<input type="text"/>