MINNESOTA TAX CLEARANCE

- The licensing authority is required to provide to the Minnesota Commissioner of Revenue your Minnesota business tax identification number and the social security number of each license applicant.
- Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding use of this information: (1) This information may be used to deny insurance, renewal or transfer of your license in the event you owe the Minnesota Department of Revenue delinquent taxes, penalties or interest; (2) Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal exchange of information agreement, the Department of Revenue may supply this information to the Internal Revenue Service; (3) Failure to supply this information may jeopardize or delay the issuance of your license or processing your renewal application.

This information will be collected by the licensing agency and retained in their files.

| APPLICANT'S NAME (LAST, FIRST, MI): | | | SOCIAL | SECURITY NUMBER | |
|--|----------------------|--------------|------------------------------------|-----------------|--|
| , , , , | | | | | |
| HOME ADDRESS: | CITY | ZI | P CODE | PHONE NUMBER | |
| ві | JSINESS INFORM | ATION | | , | |
| BUSINESS NAME: | | | | | |
| BUSINESS ADDRESS: | CITY | Z | IP CODE | PHONE NUMBER | |
| MINNESOTA TAX IDENTIFICATION NUMBER: | | | FEDERAL TAX IDENTIFICATION NUMBER: | | |
| F A MINNESOTA TAX IDENTIFICATION NUMBER IS | S NOT REQUIRED PLEAS | SE EXPLAIN: | | | |
| | | | | | |
| | | | | | |
| SIGNATURE PO | SITION (Officer, Par | tner, etc.): | DAT | TE SIGNED | |