



OKLAHOMA RETAIL FIREWORKS REGISTRATION APPLICATION

_____ Business Name (same as Part 5, Item 1)	_____ FEIN/SSN
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PART 1 - INDICATE THE REASON(S) FOR FILING THIS FORM:

A New Business
 B Additional License/Permit
 C Other (explain) _____

PART 2 - CONTACT INFORMATION:

1. Business Phone: () _____

2. Business Fax: () _____

3. Name: _____

4. Email Address: _____

PART 3 - OWNERSHIP TYPE:

1. **How is this business owned?**

A Individual (Sole Proprietor)*
 B General Partnership
 C Limited Partnership
 D Oklahoma Corporation
 E Foreign Corporation
 F Limited Liability Company
 G Other (explain) _____

2. **Federal Employer's Identification Number (FEIN):** _____

3. **Name of Individual, Partnership, Corporation or Limited Liability Company:**

Social Security Number, if individual: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ County: _____

4. **Physical Location of Entity:** _____
(street and number or directions, not post office box or rural route)

City: _____ State: _____ Zip: _____ County: _____

5. **Name(s) of Partner/Responsible Corporate Officer/Managing Member:** (see instructions)
(If Social Security Number is not provided below, the application will be returned for completion.)

_____	_____	_____	_____	_____
<small>First Name</small>	<small>Middle Initial</small>	<small>Last Name</small>	<small>Social Security Number</small>	<small>Title</small>

_____	_____	_____	_____
<small>Mailing Address</small>	<small>City</small>	<small>State</small>	<small>Zip Code</small>

Attach separate sheet if necessary.

PART 4 - WAGE WITHHOLDING TAX:

1. Do you now or do you intend to withhold Oklahoma Income Tax from employees? Yes No

 (a) If "yes" on item 1, do you expect to withhold more than \$500 per quarter?..... Yes No

 (b) If "yes" on item 1, date you will begin/began withholding Oklahoma Income Tax: _____
(month/day/year)

 (c) Are you required to make federal withholding tax deposits more frequently
 than once a month? Yes No

2. What FEIN will you use to report withholding tax? (if different than Part 3, Item 2)

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AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

All sole proprietors applying for a business permit or license with the Oklahoma Tax Commission are required, by the provisions of 56 O.S. Supp 2007 Section 71, to provide the Commission with verification of lawful presence in the United States by executing the Affidavit below before a notary public or other officer authorized to notarize affidavits under State law.

➔ This affidavit must be returned with your license/permit application.

State of Oklahoma

County of: _____

I, _____ being of lawful age, state under penalty
print name

of perjury, as follows:

Please check the appropriate box(es)

My Social Security Number is: _____

My Individual Tax Identification Number is: _____

I am a United States Citizen.

I am a qualified alien under the Federal Immigration and Nationality Act and am lawfully present in the United States.

My Alien Registration Number (A#) or I-94 Number is: * _____

Date of Birth: * _____

I state under penalty of perjury under the laws of Oklahoma the foregoing is true and correct and I have read and understand this form and executed it in my own hand.

Signature of Applicant _____

Subscribed and sworn to or affirmed before me this _____ day of _____, 20____ ,

by _____ (applicant name - please print).

Notary _____

My Commission Expires: _____

My Commission Number: _____

*Either the A# or the I-94 number, and date of birth must be provided. The Alien Registration Number (A#) and the I-94 (arrival/departure) numbers are issued by the U.S. Citizenship and Immigration Service.

Official Use Only: Verified: _____ Date: _____ Initials: _____

OKLAHOMA RETAIL FIREWORKS REGISTRATION APPLICATION INSTRUCTIONS

Page A - Part 1: Reasons for Filing this Form

Check the appropriate box:

- A. New Business. Check this box if you are opening a new business and do not have permits or licenses.
- B. Additional licenses/permits. Check this box if you have a license/permit and are applying for other licenses/permits (Example: You purchased an additional business for which you will need licenses/permits).
- C. Other. If you checked "other" explain your reason for filing this form.

Page A - Part 2: Contact Information

Items 1 through 4. Please provide the business phone, fax number, name and email address where the applicant can be contacted.

Page A - Part 3: Ownership Type

1. Check the box which indicates how your business is owned.

* Individual (Sole Proprietor): The business is owned by one individual. If you are a Sole Proprietor you must complete the Affidavit Verifying Lawful Presence in the U.S. (Page C). The affidavit must be signed and notarized. The affidavit must have your Social Security Number, or Individual Tax Identification Number and Alien Registration Number (A# or I-94). If you are changing entities from a corporation, LLC, or partnership to a sole proprietor, you must complete the affidavit. If you are a sole proprietor, your registration application can not be processed without a properly executed affidavit.

Note: The affidavit is required by the Oklahoma Taxpayer and Citizen Protection Act, specifically Title 56 O.S. Supp. 2007, Section 71.

2. Federal Employer Identification Number (FEIN). You must have an FEIN if you:
 - Pay wages to one or more employees or;
 - Are a corporation, trust, estate, general or limited partnership, limited liability company, or non-profit organization (church, club, etc.).
3. Name of Owner. If you are a/an:
 - Individual Print your last name, first name, middle initial and social security number.
 - Partnership.....Print the name of partnership.
 - Corporation.....Print the corporate name as it appears on the Articles of Incorporation or Domestication.
 - Limited Liability Company.....Print the entity name as it appears on the Articles of Organization.
 - Other..... Print the name of the business entity.Provide the Social Security Number, if individual.
Provide the mailing address of your business.
4. Provide the physical location of the Entity. Use street and number or driving directions. Do not use a post office box or rural route.
5. Name of Partner, Responsible Corporate Officer or Managing Member:

Please Note: Social Security Numbers are required by OTC Rule 710:1-3-6. To list multiple names attach a separate sheet. If a Social Security Number is not provided, the application will not be processed and will be returned for Social Security Numbers.

Print the first name, middle initial and last name, social security number, title and residence and post office mailing address for one partner, responsible corporate officer, or managing member responsible for the reporting and remittance of taxes.

Page A - Part 4 Wage Withholding Tax

Items 1 and 2. Complete if your business employs or will employ one or more individuals in the State of Oklahoma. If not, go to Part 5.

Page B:

Enter business name (Part 5, Item 1) and FEIN or SSN at the top of the page.

Page B - Part 5: Physical Location and Classification Information

If you operate more than one location in Oklahoma, separate pages B, Parts 5 and 6 must be completed for each location. In the upper right corner of page B, indicate the number of copies attached.

1. Enter the trade name or DBA of business (Example: Joe's Fireworks Stand).
 - 2a. Enter the physical location of the Fireworks Stand, including the county. Do not use post office boxes or rural route addresses.
 - 2b. If the business is inside the city limits, check yes.
 3. Enter the phone, fax number and email address of the business entity.
- 4 and 5 are the determination for reporting, collecting, and apportionment of city/county sales and use taxes.

Page B - Part 6: Sales Tax

1. If you hold or have ever held an Oklahoma Sales Tax Permit, enter the number(s). If you need additional space, please attach a schedule of permits.
2. Provide the date you will begin or began sales in Oklahoma subject to sales tax.

Page B - Part 7: Signature

Application must be signed by the business owner, or, in the case of a partnership, LLC or corporation, etc., the responsible person for reporting and remitting taxes.

Page B - Part 8: Fees

Please check the appropriate box(es) for each license and/or permit you are applying for and enter the applicable fee amount in the "Total" column at the far right.

Make Checks Payable to: Oklahoma Tax Commission.