



TENNESSEE DEPARTMENT OF REVENUE
Application for Registration

RV-F1300501 (7/17)

SPECIAL EVENT
CASUAL FILER

Answer all questions below completely. Incomplete and unsigned applications will delay processing.

1. Legal Name of Applicant			
2. DBA Name (If different from above)			
3. Event Location Address (Physical address only; no P.O. Box)	City	State	Zip
4. Mailing Address	City	State	Zip
5. Legal Address (Physical address where business records are kept; no P.O. Box)	City	State	Zip
6. Business Telephone Number	Business Fax Number	Business Email Address	
7. Contact Name	Contact Telephone Number	Contact Email Address	
8. Start Date in Tennessee	9. Fiscal Year End Date	10. FEIN or SSN	

11. Type of Ownership:

- | | | |
|---|---|---|
| ☐ Sole Proprietorship | Partnership (choose type below) | Corporation (choose all that apply) |
| ☐ Marital Joint Ownership | ☐ General Partnership | ☐ Tennessee Domestic Corporation |
| ☐ Estate/Trust | ☐ Limited Partnership | ☐ Foreign Corporation |
| ☐ Government Entity | ☐ Limited Liability Partnership | ☐ S Corporation |
| ☐ Real Estate Investment Trust | Limited Liability Company (choose all that apply) | |
| | ☐ Multi-Member LLC | |
| | ☐ Single Member LLC | |
| | ☐ Professional Limited Liability Company | |

12. Tennessee Secretary of State Control Number	Primary State of Charter/Registration
---	---------------------------------------

13. Taxes to Register for on this Application:

- | | | | |
|--|--|--|--|
| ☐ Sales and Use | ☐ Bail Bonds | ☐ Utilities - Gas, Water, Electric Power, and Light | ☐ Tobacco |
| ☐ Franchise and Excise | ☐ Beer Barrelage * | ☐ Liquor by the Drink * | ☐ Used Oil Fee |
| ☐ Business Classification _____ | ☐ Bottlers | ☐ Litigation | ☐ Wholesale Beer * |
| County _____ | ☐ Brand Registration * | ☐ Mineral Severance | ☐ Wholesale Gallonage * |
| City _____ | ☐ Coal Severance | ☐ Mixing Bar | ☐ Wine Direct Shipper |
| Out-of-State _____ | ☐ Crude Oil/Natural Gas Severance | ☐ Petroleum * | ☐ Winery * |
| ☐ Auto Rental Surcharge | ☐ Fantasy Sports | ☐ Tire Fee | |

Note: Electronic filing and payment of taxes is required for sales and use tax, franchise and excise tax, tobacco tax, liquor-by-the-drink tax, and business tax. Please visit www.tn.gov/revenue for more information.

* Requires Bond

Event Name: _____
Promoter Location ID: _____
Event Start Date: _____
Event End Date: _____

FEIN for Master LLC: _____

Entity Name for Master LLC: _____

Location Address for Master LLC: _____

Telephone Number for Master LLC: _____

State of Domestic Certificate of Authority for Master LLC: _____

☐ Manufacturing ☐ Service ☐ Wholesale ☐ Retail ☐ Both Wholesale/Retail ☐ Contractor ☐ Other

17. Business Activity	18. NAICS Code (if known)
-----------------------	---------------------------

Legal Name	Legal Name
Title	Title
SSN or FEIN	SSN or FEIN
Address	Address
CityStateZip	CityStateZip
Telephone Number	Telephone Number
Email Address	Email Address

20. The statements made on this application are true to the best of my knowledge and belief. **This application must be signed by an individual, owner, partner, or officer of the entity listed above. Do not print or use a stamp.**

Signature: _____ **Date:** _____

Owner, Partner, or Officer