



Dipåttamenton Kontribusion yan Adu'aña

DEPARTMENT OF

REVENUE AND TAXATION

GOVERNMENT OF GUAM

Gubetnamenton Guåhan

TAX PREPARER CLEARANCE FORM

Name of Tax Preparer _____

DBA Name (if any): _____

Indicate DBA: ☐ Sole-Proprietor ☐ Partnership ☐ LLC ☐ Corporation

SSN: _____ EIN: _____ GRT Acct. No. _____

Type of License Applied: () New () Renewal

Current Business Location: _____

Business Mailing Address: _____

Telephone No.: _____ Email Address: _____

Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

The above-stated applicant is requesting clearance for issuance of new/renewal license:

<u>Business Privilege Tax Branch</u>	<u>Income Tax Processing Branch</u>
<u>Collection Branch</u>	<u>Business License Branch for Business License and Annual Report (if applicable)</u>