

**OREGON EMPLOYMENT DEPARTMENT
TAX COMPLIANCE CERTIFICATION**

PART 1: TO BE COMPLETED BY APPLICANT

Applicant Name (Last, First, Middle Initial): _____ Check One: <input type="checkbox"/> Owner <input type="checkbox"/> Employee	Social Security Number (SSN):* <p align="center">DO NOT COMPLETE</p> _____
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Business Name: _____ _____	Employer Identification Number (EIN): _____
	Oregon Business ID Number (BIN): _____

DBA (Doing Business As), if applicable: _____

Have you done business under any other business name or employer identification number (EIN)? No Yes
 (If yes, list names and EIN numbers):

NAME: _____ **EIN:** _____

Address (Street, City, State, Zip Code): _____ _____ _____	Daytime Telephone: _____ FAX Number: _____
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Type of Business: (Check one for each applicant) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other (Specify) _____ Did you have employees working for you in the past 12 months? <input type="checkbox"/> No <input type="checkbox"/> Yes Number: _____ Do you expect to have employees working for you in the next 12 months? <input type="checkbox"/> No <input type="checkbox"/> Yes Number: _____	<p align="center">MAILING ADDRESS</p> <p>Oregon Employment Department ATTN: Tax 875 Union Street NE Salem, OR 97311-0030</p> <p>Telephone: (503) 947-1488 FAX: (503) 947-1700</p>
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PART 2: THIS SECTION TO BE COMPLETED BY EMPLOYMENT DEPARTMENT STAFF ONLY

	YES	NO	\$ AMOUNT
Outstanding Liability	<input type="checkbox"/>	<input type="checkbox"/>	_____
Returns Filed:	<input type="checkbox"/>	<input type="checkbox"/>	_____
Payroll (Form OQ)	<input type="checkbox"/>	<input type="checkbox"/>	_____
Payroll (Form 132) Wage Detail	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other (Specify) _____			_____

COMPLIANCE CERTIFICATION BY EMPLOYMENT DEPARTMENT:

COMPLIANT NON-COMPLIANT

Signature of ED Certifying Official _____ **DATE:** _____

*Privacy Act Statement: The submission of your social security number is voluntary. It will be used only for identification purposes to facilitate your application for a labor contractor's license. Failure to provide it may result in a delay of the application process.