

**For Office Use Only**  
**Account Number**

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**CITY OF BATON ROUGE**  
**PARISH OF EAST BATON ROUGE**  
**P.O. BOX 2590**  
**BATON ROUGE, LA 70821**  
**PHONE: (225) 389-3084**  
**FAX: (225) 389-5369**  
**Email: [FinRevInternetEmail@brla.gov](mailto:FinRevInternetEmail@brla.gov)**  
**Revised 08/02/2019**

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Louisiana Tax Number ABBAAFBFDBS  
 Federal ID Number \_\_\_\_\_  
 Description of Business \_\_\_\_\_  
 NAIC Number \_\_\_\_\_ (See List of Business Classes attached)

**LEGAL NAME OF BUSINESS** \_\_\_\_\_  
**TRADE NAME OF BUSINESS** \_\_\_\_\_  
**PHYSICAL LOCATION (NOT a P.O. Box)**  
 \_\_\_\_\_  
 \_\_\_\_\_  
**MAILING ADDRESS**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Business Telephone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_**

<b>APPLICATION FOR:</b> <input type="checkbox"/> Sales Tax Registration <input type="checkbox"/> Occupational License Tax <input type="checkbox"/> Hotel Motel Tax <input type="checkbox"/> Insurance Premium Tax <input type="checkbox"/> Gross Receipts Tax <input type="checkbox"/> Other _____	<b>DATE IN BUSINESS:</b> ____ / ____ / ____ <input type="checkbox"/> Taxicab <input type="checkbox"/> Vehicles for Hire <input type="checkbox"/> Arborist <input type="checkbox"/> Garbage & Trash <input type="checkbox"/> Online Short-trm Rental Platform	<b>BUSINESS LOCATION:</b> <input type="checkbox"/> City Limits of Baton Rouge <input type="checkbox"/> Unincorporated Parish of EBR <input type="checkbox"/> City Limits of Baker <input type="checkbox"/> City Limits of Central <input type="checkbox"/> City Limits of Zachary <input type="checkbox"/> Business Located Outside of EBR
<b>REASON FOR APPLYING:</b> <input type="checkbox"/> New Business <input type="checkbox"/> Purchased Existing Business?		
<input type="checkbox"/> Home Based      ← If checked, Home Based Business Signature form attached and signed <input type="checkbox"/>		
<input type="checkbox"/> Waste Tire Generator      ← If checked, provide DEQ Waste Tire Generator # _____		
Previous Business Owner: _____ Trade Owner/Business: _____ Previous Account Number: _____		

**FOR OCCUPATIONAL LICENSE ONLY**

Hotel / Nursing Home / Rooms  (# of rooms) x \$2 per room = \$ \_\_\_\_\_  
 Security Deposit Due?  Yes  No      Deposit Due: \$ \_\_\_\_\_

**If business opened less than 30 days ago:**  
 Business opened on or prior to June 30 of current year (**Minimum Payment \$50**) OR \$ \_\_\_\_\_  
 Business opened on or after July 1 of current year (**Minimum Payment \$25**) OR \$ \_\_\_\_\_  
**Professional Business** opened any time during the year (**Minimum Payment \$50**) \$ \_\_\_\_\_  
 Flat Fee Business      \$100 / \$200 / \$250      \$ \_\_\_\_\_

**If business opened more than 30 days ago (Tax Due for First Year of Business):**  
 Enter Gross Receipts (1<sup>st</sup> 30 days in business)      \$ \_\_\_\_\_  
 Less Allowable Deductions      \$ \_\_\_\_\_  
 Tax Basis (Gross Receipts less Deductions)      \$ \_\_\_\_\_  
 Multiply Tax Basis by # of months in business\*      \$ \_\_\_\_\_  
 \*(Any month open at least 15 days)      Tax Due (Based on applicable Tax Table)      \$ \_\_\_\_\_

Penalty      \$ \_\_\_\_\_  
 Interest      \$ \_\_\_\_\_  
**Total Due**      \$ \_\_\_\_\_

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← Enter as PAY  
 ← Enter as DIR

← MIN (no I&P)  
 ← MIN (no I&P)  
 ← MIN (no I&P)  
 ← Enter as PAY

← Enter as PAY

ABC Account

Clearance Issued



**CONTACT PERSON:** \_\_\_\_\_ Contact Phone: \_\_\_\_\_  
 Contact Fax: \_\_\_\_\_ Contact E-mail: \_\_\_\_\_

**TYPE OF ORGANIZATION (Ownership)** – Please attach a copy of your charter

Individual  Partnership  Corporation  LLC  LLP  Non-Profit  Governmental  Other

**IF an Individual:** Owner's Name \_\_\_\_\_  
 (Attach valid photo ID) Owner's Address \_\_\_\_\_

Owner's SS# \_\_\_\_\_  
 E-mail Address \_\_\_\_\_

**IF a Corporation, LLC, LLP, or Partnership:** Officer / Manager / Partners Name \_\_\_\_\_  
 (Attach additional names if necessary) Title \_\_\_\_\_  
 Home Address \_\_\_\_\_

Telephone Number \_\_\_\_\_  
 Web Site \_\_\_\_\_

**Agent for Service of Process:** Name \_\_\_\_\_  
 Address \_\_\_\_\_

This will affirm that the statements made herein are true and correct to the best of my knowledge:

Signature of Applicant or Owner \_\_\_\_\_ Title \_\_\_\_\_

Signature of Preparer \_\_\_\_\_ Date \_\_\_\_\_

**Please make checks payable to Parish and City Treasurer**

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**LOCATION/DOMICILE (Circle One)**

0001 City of Baton Rouge / EBR Sch Bd  
 0002 EBR Parish / EBR Sch Bd  
 0003 City of Baker / Baker Sch Bd  
 0004 City of Zachary / Zachary Sch Bd  
 0005 EBR Parish / Zachary Sch Bd  
 0006 City of Baker / EBR Sch Bd  
 0007 City of Central / Central Sch Bd  
 0008 EBR Parish / Central Sch Bd  
 0009 Outside EBR Parish  
 0010 Outside Louisiana

**FILING FREQUENCY**  
 A M Monthly  
 B Q Quarterly  
 C O One Time Sale  
 D X Irregular Filer  
 E L Annual (License Only)  
 F  
 G  
 H

**CLASS (Circle One)**

0100 Public Utility Only  
 0101 Public Utility / OLT  
 0102 Public Utility / STX  
 0103 Public Utility / STX / OLT  
 0200 IPT  
 0201 IPT / STX  
 0300 HM / Rms  
 0301 HM / Rms / STX  
 0302 HM / Rms / STX / OLT  
 0303 HM / Rms / STX / OLT / ABC  
 0304 HM  
 0305 HM / STX  
 0400 Nursing Home / Rms  
 0401 Nursing Home / Rms / STX  
 0500 Amusement Only  
 0501 Amusement / STX  
 0502 Amusement / STX / OLT  
 0503 Amusement / STX / OLT / ABC  
 0600 STX Only  
 0601 STX / OLT  
 0602 STX / OLT / ABC  
 0700 OLT Only

**ACCOUNT TYPE (Circle One)**

1520 Service/Rental/Etc.  
 1521 Airline  
 1522 Travel Agency  
 1523 Nursing Home  
 1525 Retail Dealer  
 1530 Retail Dealers In Motor Fuels  
 1540 Pawn Broker  
 1601 Retail Dealer – Institutional Consumers  
 1610 Wholesale Dealer  
 1611 Bulk Petro  
 1612 Wholesale – Motor Vehicle  
 1622 Building Materials  
 1710 Finance  
 1820 Commissioned Services  
 1822 Real Estate Broker  
 2010 Investment Banking  
 2020 Itinerant Vendor (Agricultural & Seafood)  
 2021 Itinerant Vendor (Parades & Food Vendor)  
 2022 Promoter  
 2023 Rolling Vendor  
 2060 Special Events  
 2070 Museum for Profit / Transient  
 2090 Professional  
 2640 Retail Autos  
 2710 Contractor  
 6000 Insurance Company  
 7001 Public Utilities-Gross Receipts  
 9999 No Occupational License

**GROUP (Circle One)**

0000 Not Assigned  
 0001 Mall of Louisiana  
 0002 Cortana Mall  
 0003 Major Chemical & Manuf  
 0004 Hammond Aire  
 0005 Downtown Development  
 0008 Perkins Rowe  
 0009 Towne Center

**CATEGORY (Circle One)**

0900 Walk-in Registration  
 0901 Mail-in Registration  
 0902 Electronic Registration  
 0903 Issue to Post  
 0904 Revenue Inspector  
 0905 Audit Registration  
 0906 File Conversion

**Account Set Up By:** \_\_\_\_\_

**Payment Received By:** \_\_\_\_\_

**PLEASE CHOOSE A BUSINESS CATEGORY THAT BEST DESCRIBES YOUR BUSINESS ACTIVITY**

NAIC	CATEGORY DESCRIPTION	DETAIL DESCRIPTION
111000	Agriculture, Forestry, Fishing	Crop Production
112000	Agriculture, Forestry, Fishing	Animal Production
211000	Mining	Oil & Gas Production
212000	Mining	Mining (Except Oil & Gas)
221000	Utilities	Utilities
236000	Construction	Construction of Buildings
237000	Construction	Heavy & Civil Engineering Construction
238000	Construction	Specialty Trade Contractors
311000	Manufacturing	Food Manufacturing
312000	Manufacturing	Beverage & Tobacco Product Manufacturing
314000	Manufacturing	Textile Product Mills
322000	Manufacturing	Paper Manufacturing
324000	Manufacturing	Petroleum & Coal Products Manufacturing
325000	Manufacturing	Chemical Manufacturing
326000	Manufacturing	Plastics & Rubber Product Manufacturing
339000	Manufacturing	Miscellaneous Manufacturing
423000	Wholesale Trade	Merchant Wholesalers, Durable Goods
424000	Wholesale Trade	Merchant Wholesalers, Nondurable Goods
441000	Retail Trade	Motor Vehicle & Parts Dealer
442000	Retail Trade	Furniture & Home Furnishing Stores
443000	Retail Trade	Electronic & Appliance Stores
444000	Retail Trade	Building Material & Garden Equip/Supplies
445000	Retail Trade	Food & Beverage
446000	Retail Trade	Health & Personal Care Stores
447000	Retail Trade	Gasoline Stations
448000	Retail Trade	Clothing & Clothing Accessories Stores
451000	Retail Trade	Sporting Goods, Hobby, Book/Music Stores
453000	Retail Trade	Miscellaneous Store Retailers
454000	Retail Trade	Nonstore Retailers
481000	Transportation & Warehouse	Air Transportation
482000	Transportation & Warehouse	Rail Transportation
484000	Transportation & Warehouse	Truck Transportation
485000	Transportation & Warehouse	Transit & Ground Passenger Transportation
486000	Transportation & Warehouse	Pipeline Transportation
488000	Transportation & Warehouse	Miscellaneous Transportation
493000	Transportation & Warehouse	Warehousing & Storage
512000	Information	Motion Picture & Sound Recording Industries
515000	Information	Broadcasting (except internet)
517000	Information	Telecommunications, Internet Service Providers
518000	Information	Portals & Data Processing Services
521000	Finance & Insurance	Monetary Authorities
524000	Finance & Insurance	Insurance Carriers & Related Activities
531000	Finance & Insurance	Real Estate
532000	Finance & Insurance	Rental & Leasing Services
541000	Professional, Scientific & Technology	Professional, Scientific & Technology
551000	Management of Companies	Management of Companies & Enterprises
561000	Administrative & Support Services	Administrative & Support Services
611000	Educational Services	Educational Services
621000	Health Care & Social Assistance	Ambulatory Health Care Services
622000	Health Care & Social Assistance	Hospitals
623000	Health Care & Social Assistance	Nursing & Residential Care Facilities
624000	Health Care & Social Assistance	Social Assistance
711000	Arts, Entertainment & Recreation	Performing Arts, Spectator Sports & Related Industries
712000	Arts, Entertainment & Recreation	Museums, Historical Sites, & Similar Institutions
713000	Arts, Entertainment & Recreation	Amusement, Gambling & Recreation Industries
721000	Accommodation & Food Service	Accommodation
722000	Accommodation & Food Service	Food Services & Drinking Places
811000	Other Services	Repair & Maintenance
812000	Other Services	Personal & Laundry Services
813000	Other Services	Religious, Grantmaking, Civic, Professional & Similar Services
815000	Other Services	Miscellaneous Other Services



## Department of Finance Revenue Division

City of Baton Rouge  
Parish of East Baton Rouge  
222 St. Louis Street Rm. #404  
Baton Rouge, Louisiana 70802  
Office: (225) 389-3084  
Fax: (225) 389-5369

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### Home Based Business Guidelines

In order to legally operate a business from a residence, the following guidelines must be strictly followed:

- No signs shall be used
- Nothing shall be done to make the building appear in any way as anything other than a dwelling
- No business such as a shop or store shall be conducted upon the premises
- No one shall be employed from outside the resident family
- Mechanical equipment used shall be only that normally used in, or found in a single-family dwelling
- No customers shall conduct any business (including meetings) upon the premises

I understand and agree to comply with the above guidelines and all other applicable City-Parish laws and regulations regarding the operation of a business.

Business Name: \_\_\_\_\_ Account No: \_\_\_\_\_

\_\_\_\_\_  
Print Name of Responsible Party

\_\_\_\_\_  
Signature of Responsible Party



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### **Dealer Responsibility to Maintain Updated Contact Information**

Per Louisiana R.S. 47:337.29(C): Any dealer shall have an obligation to use reasonable means to notify and provide a collector with accurate and updated information pertaining to its proper address and the names and contact information for those officers or directors, or members or managers having direct control or supervision over its local sales and use taxes and those charged with the responsibility of filing a dealer's sale and use tax return with the collector. **This obligation shall be continuing and a dealer shall notify the collector of any changes, additions or deletions within 30 calendar days of any change.**

I understand and agree to comply with the above guidelines and all other applicable City-Parish laws and regulations regarding the operation of a business.

Business Name: \_\_\_\_\_ Account No: \_\_\_\_\_

\_\_\_\_\_  
Print Name of Responsible Party

\_\_\_\_\_  
Signature of Responsible Party