



# Calcasieu Parish Sales and Use Tax Department

P.O. Drawer 2050, Lake Charles, LA 70602-2050 (337)217-4280 Fax (337)217-4281

Visit us at [www.calcasieusalestax.org](http://www.calcasieusalestax.org) or [www.laota.com](http://www.laota.com)  
Application for Registration LATA approved

NOTE: A separate application is required for each location

CHECK ALL THAT APPLY:	
<input type="checkbox"/>	Sales Tax
<input type="checkbox"/>	Hotel/Motel

- Reason for applying:
  - Started new business
  - Opening additional location
  - Merger \_\_\_\_\_ and \_\_\_\_\_
  - Change of name
  - Purchased ongoing business:
 

Name of previous owner : \_\_\_\_\_

Trade name of previous owner \_\_\_\_\_

Parish account number \_\_\_\_\_
  - Other \_\_\_\_\_
- LA Sales Tax Number \_\_\_\_\_  Applied For  None
  - Federal Identification Number \_\_\_\_\_  Applied For  None
  - US NAICS code \_\_\_\_\_ US NAICS code description \_\_\_\_\_
  - How many other locations in this Parish \_\_\_\_\_
- Legal name(s): Individual, partners, or corporation \_\_\_\_\_
  - Trade name of business \_\_\_\_\_
- Business location address \_\_\_\_\_ B. City and state \_\_\_\_\_  
(Street, route, or highway – NOT P. O. Box or General Delivery)
  - Zip \_\_\_\_\_ D. Telephone (\_\_\_\_\_) \_\_\_\_\_ E. Parish in LA \_\_\_\_\_
- Address for receiving tax forms and correspondence (if same as location, write "Same")  
\_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_
- Contact Person \_\_\_\_\_ B. Contact phone number (\_\_\_\_\_) \_\_\_\_\_
  - Fax number \_\_\_\_\_ D. E-mail \_\_\_\_\_ E. Web \_\_\_\_\_
  - Location of accounting records \_\_\_\_\_
- Type of organization
  - Individual
  - Partnership
  - Corporation
  - LLC
  - LLP
  - Governmental
  - Non-profit
  - Other \_\_\_\_\_
- If sole owner (individual): Name \_\_\_\_\_ SSN: \_\_\_\_\_  
Home address \_\_\_\_\_ Telephone (\_\_\_\_\_) \_\_\_\_\_
- If Corporation, LLC, LLP, or Partnership: name, title, Social security number, home address, and telephone number of officers, members, managers, or partners:

Name	Title	SSN
Address	City State Zip	Phone Number
Name	Title	SSN
Address	City State Zip	Phone Number

- Agent for service: Name, physical address and phone #: \_\_\_\_\_
- First date sales will be made from this location \_\_\_\_\_ started operations \_\_\_\_\_
- Nature of Business  Retail Sales  Repair Service  Retail Service  Wholesale  
 Manufacturing/Fabricating  Contractor  Other
  - Describe in detail** your business: type of sales, activity, or service you perform \_\_\_\_\_
- Requested Reporting Status:  Monthly  Quarterly  Annual  
Reporting frequency and filing status will be determined by the Administrator according to parish policy. Businesses with a location within the parish will automatically be registered to file on a monthly basis. Annual filers are intended for those businesses (1) that do not have a location within the parish and do not intend on doing business on a regular basis; and/or (2) businesses that perform services that are not taxable.
- Where do you anticipate your taxable transactions to occur? Check box(s):  Parish Wide  State Wide  Other

**Dealer Responsibility to Maintain Updated Contact Information:** Per LA 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 sales 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 affirm that the information given on this application is true and correct. 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. I/we, the undersigned, acknowledge that I/we have direct control or supervision of the remittance of sales tax to collector and acknowledge that I/we can be held personally liable for the total amount of taxes, interest, penalties, court costs, and attorney fees due pursuant to LSA R.S. 47:337.46.

Signature of Applicant \_\_\_\_\_ Title \_\_\_\_\_

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

## Instructions Sales Tax Registration Application for Calcasieu Parish

Please review these instructions carefully. Failure to complete ALL applicable lines will delay the processing of this application, the assigning of your tax number, and the issuance of the applicable certificate. Please type or use only a black or blue ink pen to fill out this form.

**Who must file** – Each person pursuing any trade, profession, vocation, calling, or business should complete this form. Each person is required to keep reasonable records. Separate records are required for each place of business. For assistance call (337) 217-4280 or see the FAQ section on our website.

**Sales and use tax** – Any individual firm, corporation, trust, co-partnership, joint venture, association, this state, city or parish, municipality, district, or other political subdivision thereof, is required to file and remit appropriate sales taxes by the twentieth (20th) day following the close of each reporting period for any of the following transactions that are taxable under the Sales and Use Tax statutes:

1. The sale of tangible personal property at retail in this state;
2. The use, consumption, distribution, or storage for use or consumption, in this state of any tangible personal property;
3. The lease or rental within this state of any item or article of tangible personal property;
4. The sale of services as defined in the statutes. These services include the furnishing of rooms by hotels; the sale of admissions to places of amusement and to athletic and recreational events, and the furnishing of the privilege of access to amusement, entertainment, athletic, or recreational facilities and buying clubs, the furnishing of storage or parking privileges by auto hotels and parking lots; the furnishing of printing or overprinting; the furnishing of laundry cleaning, pressing, and dyeing services; the furnishing of cold storage space and the preparation of property for such storage; and, the furnishing of repairs to tangible personal property.

Any person who leases or rents tangible personal property in the parish, who furnishes services taxable under the statute or ordinances, who holds property in the parish for resale, who maintains a business location in the parish, or who solicits orders, or otherwise operates in the parish through full-time or part-time resident or nonresident salesmen or agents, is required to obtain a sales tax certificate, collect the proper taxes from customers, and file returns with the Calcasieu Parish Sales and Use Tax Department. For local sales tax purposes only, retail transactions are taxable. Therefore, a resale certificate should be used on wholesale purchases.

A person who purchases, imports, or receives property and services subject to tax, or who is the lessee or rentee of tangible personal property on which the proper taxes were not collected by vendors, is himself liable for the payment of taxes directly to the Calcasieu Parish Sales and Use Tax Department. **All new sales and use tax accounts are registered to file on a monthly basis unless otherwise determined.**

**Tax office location:** 2439 6<sup>th</sup> Street  
Lake Charles, LA 70601

Regular Office hours: 8:00am – 4:30pm  
Summer Office hours: 8:00am - 4:00pm  
(June through August)

1. Reason for applying
  - A. Self-explanatory.
  - B. If buying an existing business, have you received verification from the taxing authority that all tax liabilities have been paid? (LA R.S. 47:308 – see below).
  - C. Self-explanatory.
  - D. List all the business names that created the merger.
  - E. Self-explanatory
  - F. Indicate if this is a change in business structure or if acquired by gift, trust, etc.
2. A.-B. Self-explanatory.
  - C. US NAICS Code – United States North American Industry Classification System (NAICS) code is **required** on all applications. Your business code may be selected based upon the description of your primary business at this website: [www.naics.com](http://www.naics.com). If you have a Federal Employer ID number (FEIN), a NAICS code may have been assigned and may be found on the tax return under “Business Code.”
  - D. List the number of other business locations in Calcasieu Parish. Each location requires a separate application and account number.
3. A. Legal Name – The person(s) or corporation under whose name this business is to be registered. If corporate, give true corporate name.
  - B. Trade Name – The name under which this business will operate – the dba name. If you have no trade name, leave this line blank.
4. A. B. C. Location Address - This address is the street address or other meaningful address, the city, town, or village, and the ZIP Code, in which your business is geographically located, irrespective of where you receive your mail.
  - D. Telephone number at the business location.
  - E. If business is located in LA, list the parish where it is located
5. A. B. C. Mailing Address – **ALL** tax returns, permits, and other related communications will be mailed to this address.
  - A. The name of the person responsible for the sales tax return.
  - B. Telephone number of the person responsible for the sales tax return.
  - C. The fax number at the mailing address.
  - D. The e-mail address of the person responsible for the sales tax return.
  - E. The web address of the company.
  - F. Where the accounting records are kept.
7. Type of organization, mark only one.
  - A.-E. Self-explanatory.
  - F. Indicate on line provided if parish, school district, or related entity such as hospital or library.
  - G. Non-profit generally must conform to Federal IRS regulations for determining a nonprofit organization. Indicate on line provided if organized for religious, scientific, humane, fraternal, or other purpose.
  - H. If not A through G, mark this box.
8. Self-explanatory.
9. Self-explanatory.
10. The person responsible for accepting notices on behalf of the legal entity that apply to due process requirements.
  - A. Indicate date that first sales will be made from this location.
  - B. Indicate date the business started.
12. A. Choose one
  - B. Describe the kind of business to be carried on at this location
13. Check the filing frequency you are requesting.
14. Self-explanatory.

**Note: You must sign and date your application. If your application was prepared by someone else, he must also sign in the appropriate space. Mail the application to P.O. Drawer 2050, Lake Charles, LA 70602-2050.**

§ 308. Termination or transfer of business Current through all 2001 Regular and Second Extraordinary Session Acts

A. If any dealer liable for any tax, interest, or penalty levied hereunder sells his business or stock of goods or quits the business; he shall make a final return and payment within fifteen days after the date of selling or quitting the business. His successor, successors, or assigns, if any, shall withhold sufficient of the purchase money to cover the amount of such taxes, interest, and penalties due and unpaid until such time as the former owner shall produce a receipt from the secretary showing that they have been paid, or a certificate

stating that no taxes, interest, or penalties are due. If the purchaser of a business or stock of goods fails to withhold purchase money as above provided, he shall be personally liable for the payment of the taxes, interest, and penalties accrued and unpaid on account of the operation of the business by any former owner, owners, or assigns.

B. In the case of a dealer who has quit a business, and who subsequently opens another similar business under the same ownership, whether that ownership is individual, partnership, corporation, or other, that dealer shall be liable for any tax, interest, or penalty owed by the original business.