## **City of Seattle Voluntary Disclosure Program Application**

This form is available for businesses to use under the City's voluntary disclosure program. The form is not mandatory. A letter may be submitted in place of this form. Businesses should also include the following information:

- Schedules (by year) showing gross income generated in Seattle by classification along with any deductions; and,
- Confidential Taxpayer Information Authorization form <u>if</u> the business is represented by a third party.

Business Name					
Legal:					
Trade Name (Doing Business As):					
Physical Address:					
Street:					
City:	State:	Zip (Postal)	al) Code:		
Mailing Address:					
Street:					
City:	State:	Zip (Postal)	stal) Code:		
Contact Information: Name:		Title:			
		Tiue:			
Phone: Email Address:					
Confirm Email Address:					
Commitme Email Address:					
Are you being represented by a lf yes, please provide a completed application.	-	☐ Yes mation Authorizat	☐ No tion Form with t	his	
Have you previously been contacted by the Department?			Yes	□No	
Have you engaged in evasion or misrepresentation?			Yes	□No	
Is the business currently under audit by the City of Seattle?			Yes	□No	

Description of Business Activities:			
How did you establish nexus with the City?			
Determine however are relieved to be a line to the Olfr O			
Date you began engaging in business in the City?			
Any other notes or additional information you wish to provide?			
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The completed form (or letter) and revenue and deductions schedules (and Confidential Tax Information Application if applicable) may be sent to:

**Mail:** City of Seattle

License and Tax Administration

ATTN: Audit - VDP P.O. Box 34214

Seattle, WA 98124-4214

**Email:** <u>tax@seattle.gov</u> (subject line should read "ATTN: Audit – VDP")

If you have questions, please call (206) 233-7095, or email mark.watterson@seattle.gov.

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