

City of Bellingham

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:

- Returns (by year) showing gross income generated in Bellingham by classification; and,
- Confidential Taxpayer Information Authorization form if the business is represented by a third party.

Business Names

Legal:
Trade Name (<i>Doing Business As</i>):

Physical Address:

Street:		
City:	State:	Zip (Postal) Code:

Mailing Address:

Street:		
City:	State:	Zip (Postal) Code:

Contact Information:

Name:	Title:
Phone:	Fax:
Email Address:	
<i>Confirm Email Address:</i>	

Are you being represented by a third party? Yes No

If yes, please provide a completed Confidential Information Authorization Form with this application.

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? Yes No

Description of Business Activities:

How did you establish nexus with the City?

Date you began engaging in business in the City?

Any other notes or additional information you wish to provide?

Voluntary Disclosure Application

The completed form (or letter) and returns (and Confidential Tax Information Application if applicable) may be sent to:

Mail: City of Bellingham
Finance Department
210 Lottie Street
Bellingham, WA 98230

Email: bls@cob.org (subject line should read "ATTN: Audit")

If you have questions, please call (360) 778-8012, or email bls@cob.org.