

**MAIL ORIGINAL TO:**  
**PLAQUEMINES PARISH**  
**SALES TAX DIVISION**  
8056 HIGHWAY 23  
SUITE 301 A  
BELLE CHASSE, LA 70037

**APPLICATION FOR**  
**PLAQUEMINES PARISH**  
**PARISH & SCHOOL BOARD**  
**SALES & USE TAX**  
**REGISTRATION CERTIFICATE**

For Collector's Use
_____
Date Received
_____
Date Certificate Issued
_____
Clerk

- Name under which business is to be conducted \_\_\_\_\_  
PRINT-Do not write
2. Owner \_\_\_\_\_  
PRINT-Name of owner if different from name on line one  
E-mail Address \_\_\_\_\_
3. Location of business \_\_\_\_\_  
Street and Number \_\_\_\_\_ City or Town \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone No. \_\_\_\_\_
4. Mailing Address (if different) \_\_\_\_\_  
P.O. Box or Street No. \_\_\_\_\_ City or Town \_\_\_\_\_ Zip Code \_\_\_\_\_ Parish \_\_\_\_\_
5. Nature of business \_\_\_\_\_  
State whether grocery, dry goods, hardware, department store, mfg., wholesale, hotel, tourist court, parking lot, printing, laundry, dry cleaning, repairs, amusements, storage, lease and rentals, etc.
6. Type of Ownership \_\_\_\_\_  
State whether individual proprietor, co-partnership or corporation.
7. Names of all partners or principal officers if a corporation \_\_\_\_\_
8. How many places of business do you operate within the Parish of Plaquemines \_\_\_\_\_  
If you operate more than one place of business, separate and complete Sales Tax registrations must be made for each location
9. What sales records do you keep \_\_\_\_\_
10. Date started, or to start at this address \_\_\_\_\_
11. Parish Occupational License No. \_\_\_\_\_
12. State of Louisiana -Sales Tax Registration No. \_\_\_\_\_

Registration Application \_\_\_\_\_ Sign here \_\_\_\_\_

Received by \_\_\_\_\_ By \_\_\_\_\_

\_\_\_\_\_ Owner, Partnership, President, etc.