

Application for Employer Identification Number (EIN)

Legal Name of Entity:

Trade Name/Doing Business As (DBA):

Mailing Address:

City:

State:

ZIP Code:

Country:

Name of Responsible Party:

SSN, ITIN, or EIN of Responsible Party:

Type of Entity:

Reason for Applying:

Date business started or acquired:

Closing month of accounting year:

Contact Phone Number: