# When to Use this



# **Application for Registered Businesses** to Add a New Florida Location

Register online at floridarevenue.com/taxes/registration. It's fast and secure.

DR-1A R. 01/22 TC 07/23 Rule 12A-1.097, F.A.C. Effective 01/22 Page 1 of 7

## Use Black or Blue Ink to Complete This Application.

If you hold an active certificate of registration or reemployment tax account issued by the Department because you previously submitted a Florida Business Tax Application, use this Application for Registered Businesses to Add a New Florida Location (Form DR-1A) to register:

- · an additional business location or Florida rental property, or
- a registered location that has moved from one Florida county to another to collect, report, and pay the following Florida taxes:
  - Sales and use tax
  - Prepaid wireless fee
  - Lead-acid battery fee

- Waste tire fee
- Rental car surcharge
- Documentary stamp tax

Bus	ines	s	nformation		
_	1.	a.	Have you previously filed a <i>Florida Business Tax Applica</i> of registration or reemployment tax account number fron	ation (online or paper Form DR-1) and received a certificate n the Department?	Yes No
it di		b.	Is your tax account with the Department currently active	?	☐Yes ☐ No
Application Eligibility			If no, STOP. You must register using the Florid	a Business Tax Application (Form DR-1).	
ᅙ		C.	Will you have employees at this location?		☐ Yes ☐ No
			If <b>yes</b> , have you registered for reemployment tax?		☐ Yes ☐ No
			If no, STOP. You must register using the Florid	a Business Tax Application (Form DR-1).	
Ę	2.		entification Numbers: rida Business Partner Number:	Consolidated Sales and Use Tax Filing Number: (if you sales and use tax return)	file a consolidated
dentification		(b	usiness partner numbers are 4 to 7 digits in length)	80-	
Ident Nur			unty Control Number: (if you use this number to unty where your business is located):	report tax for the	
	3.	Rea	son for Applying (select only one):		
			<ul> <li>Additional Florida location for currently registered business</li> </ul>	Sales and use tax for this location will be reported u (select all that apply)	using my current:
			Date of first taxable activity:	consolidated return county control r	eporting number
			mm dd yyyy		
plying			<ul> <li>Additional Florida rental property for currently registered business</li> </ul>	Sales and use tax for this location will be reported u (select all that apply)	using my current:
or Ap			Date of first taxable activity: mm dd yyyy	consolidated return county control r	reporting number
Reason for Applying			Moved registered Florida location to another Florida county - Effective date:	Current sales and use tax certificate number for loc (this number will be cancelled)	cation
			mm dd yyyy	Sales and use tax for this location will be reported (select all that apply)	using my current:
				consolidated return county control	reporting number

	Business Name Leastion and Mailing Address.	Othern Heaven	on filed with the Flerida Department of	DR-1/ R. 01/2 Page 2 of
	Business Name, Location, and Mailing Address: Sole proprietors - Use last name, first name, middle initial Partnerships - Use partnership name or last name of general partners	similar agency in	ne filed with the Florida Department o another state	State or
	Legal name of business:			
1	Business trade name "doing business as" if you have one:			
ation	Physical Address: Provide the street address of the busi	ness location or Florida rent	al property - Do not use PO Box or R	ural Route Numbers
Business Intormation	Street address:	Florida County:	Telephone #: Check if # is	outside U.S.
u ss	City / State / ZIP:		#:	ext:
rsine	·		Fax #:	
ភ	Mailing Address: Provide the name and mailing address	where tax returns and other	correspondence for your business ar	e to be mailed.
	Mail to:	Mailing address (if differe	nt than business location address):	
Susiness 5.	City / State / ZIP:  Is this business location only open during a portion o If yes, provide the: First calendar month this business location is open:	f a calendar year?		Yes No
20	Last calendar month this business location is open:			
	Last calendar month this business location is open.			
6.	Business Activities: Enter the six-digit North American Industry Classification System (NAICS) code(s) that best describes your business activities at this location. Enter your primary code first. (Enter at least one.)	Primary code		
6.	Business Activities: Enter the six-digit North American Industry Classification System (NAICS) code(s) that best describes your business activities at this location. Enter your primary	·	o search the most recent NAICS list.	
	Business Activities: Enter the six-digit North American Industry Classification System (NAICS) code(s) that best describes your business activities at this location. Enter your primary code first. (Enter at least one.)	<b>ov/naics</b> . Enter a keyword t		

7. For each of the business activities below, (select all that apply to this location):

# Sales, Rentals, or Repairs of Products

- Sell products at retail (to consumers)
  - Sell products at wholesale (to registered dealers who will sell to consumers)
- Sell products or goods from nonpermanent locations (such as flea markets or craft shows)
- Sell products or goods by mail using catalogs or the internet
- Sell, serve, or prepare food products or drinks for immediate consumption on your premises, or that you package or wrap for take-out or to go, from a temporary or permanent location Repair or alter consumer products or equipment

- Rent equipment or other property or goods to individuals or businesses
- Charge admissions or membership fees



# Sales and Use Tax (continued)

Froper	ty Rentals, Leases, or Licenses			
F	Rent or lease commercial real property to individuals or businesse	es		
	Manage commercial real property for individuals or businesses			
□ F	Rent or lease living or sleeping accommodations to others for per	iods of six months	or less	
	Manage the rental or leasing of living or sleeping accommodations	s belonging to othe	ers	
Rent or lease parking or storage spaces for motor vehicles in parking lots or garages				
□ F	Rent or lease docking or storage spaces for boats in boat docks o	r marinas		
	Rent or lease tie-down or storage spaces for aircraft at airports			
Real F	Property Contractors			
	mprove real property as a contractor			
	Sell products at retail (to consumers)			
K	Construct, assemble, or fabricate building components at your pla property improvement projects	nt or shop away fr	rom a project site that ar	e used in your real
□ F	Purchase products or supplies from vendors located outside Florid	da for use in Florid	la real property improve	ment projects
Servic	es			
	Pest control services for nonresidential buildings			
	nterior cleaning services for nonresidential buildings			
	Detective services			
_ <u>□</u> F	Protection services			
	Security alarm system monitoring services			
Fuel				
	Sell tax paid gasoline, diesel fuel, or aviation fuel to retail dealers	or end users in F	lorida (select all that app	olv below):
_	Gas station only		( 11	, ,
	Gas station and convenience store			
	☐ Truck stop			
	Marine fueling			
	☐ Aircraft fueling			
	Reseller of fuel in bulk quantities			
	Purchase dyed diesel fuel for off-road purposes			
Secon	dhand Goods or Scrap Metal			
	Purchase, consign, trade, or sell secondhand goods			
	· · · · · · · · · · · · · · · · · · ·	voled or convert fe	errous or nonferrous me	tals into raw
	Purchase, gather, obtain, or sell salvage or scrap metal to be recycled or convert ferrous or nonferrous metals into raw material products			
If you s	select either of these activities, you must also submit a <b>Registrati</b> dary <b>Metals Recyclers</b> (Form DR-1S).	ion Application fo	or Secondhand Dealer	s and
	Operated Amusement Machines			
	Place and operate coin-operated amusement machines at locatio	ns belonging to ot	hers	
	Operate coin-operated amusement machines at this location (sele			
	Self-operate some or all the amusement machines at this loc		, , , , , , , , , , , , , , , , , , ,	
	Have entered into a written agreement with the following per	•		e machines at this
	location			. masimioo at ano
N	ame:		Telephone #:	Check if # is outside U.S.
			#:	ext:
	lailing address:	City / State / ZIP	).	

If you operate amusement machines at your location or at locations belonging to others, you must also submit an *Application for Amusement Machine Certificate* (Form DR-18) to obtain an annual *Amusement Machine Certificate* for each location where you operate amusement machines.



File and Pay Electronically

# Sales and Use Tax (continued)

	Vendi	ng Machines						
Sales and Use Tax	(select	all that apply below)						
		Place and operate vending machines at locations belonging to others:						
		(Select the type or types of vending machines you operate.)						
		Food or beverage vending machines						
	_	☐ Nonfood or nonbeverage vending machines						
		Operate vending machines at this location (Select the type or types of vending machines you operate.)						
		Food or beverage vending machines						
		□ Nonfood or nonbeverage vending machines						
	Purcha	ises						
		Purchase items to use in my business without paying Florida sales tax to the seller at the time of purchase (such as from a seller						
		located outside Florida)						
		Applying for a direct pay permit to self-accrue and remit use tax directly to the Department  To apply for a parmit submit on Application for Self Accrue Authority (Direct Pay Pormit Selection and Use Tox/For	m DD 16A\					
		To apply for a permit, submit an <i>Application for Self-Accrual Authority/Direct Pay Permit Sales and Use Tax</i> (For Applying for authority to remit sales tax to the Department for independent sellers or distributors (see Rule 12A-		ido				
		Administrative Code, for more information)	1.0911, FIOII	lua				
		Administrative code, for more information)						
		This business does not conduct activities at this location subject to Florida sales and use tax						
Pre	epaid W	/ireless Fee						
ee	8. Do you	sell prepaid phones, phone cards, or calling arrangements at this location?	Yes	☐ No				
s F	If yes,	select the box that describes your sales:						
eps:		Domestic or international long distance calling or phone cards (non-wireless)						
Prepaid Wireless Fee		Prepaid wireless services (cards, plans, devices) that provide access to wireless networks and interaction with 9	11 emergen	cy services				
		te - New Tire Fee, Lead-Acid Battery Fee, and Rental Ca	r Surc	harge				
ite	<b>9</b> . Do yo	u sell (at retail) new tires for motorized vehicles at this location that are sold separately or as part of a vehicle?	Yes	☐ No				
Solid Waste Fees		u sell (at retail) new or remanufactured lead-acid batteries at this location that are sold separately	☐ Yes	☐ No				
┋╙		a component part of another product such as new automobiles, golf carts, or boats?	□ v	□ N:				
ο̈́		u operate a car-sharing service, a peer-to-peer car sharing program, or motor vehicle rental company at this on that provides motor vehicles that transport fewer than nine passengers?	∐ Yes	∐ No				
Do	cumen	tary Stamp Tax						
2 ~	<b>12.</b> Do yo	u enter into written obligations to pay money with customers at this location that are not recorded with the						
Ta)	notes	of the Court or County Comptroller (e.g., financing agreements, title loans, pay-day loans, liens, promissory or similar documents)?	☐ Yes	□No				
me m b	If woo	, do you anticipate executing five or more written obligations to pay money subject to documentary						
Documentary Stamp Tax	stamp	, do you anticipate executing live of more written obligations to pay morey subject to documentary tax per month?	Yes	☐ No				
	·			<u> </u>				
Fn	rollmar	nt to File and Pay Tax Electronically						
		it to the and tay tax bleetionically						

Filing and paying electronically is quick, easy, and secure at **floridarevenue.com/taxes/eservices**. You can electronically file and pay most taxes, fees and surcharges.

Marketplace providers and persons making a substantial number of remote sales (total of taxable remote sales in the previous calendar year exceeds \$100,000) must file and remit tax electronically.

You may choose to enroll to file or pay tax electronically. Enrolling allows you to view your payment history, reprint your payment information, and view bills posted to your account. Your bank account and contact information are saved for future transactions.

If you enroll using this application, you will receive a user ID and password for each tax account created based on the information you provide. Each account will have the same contact, banking, and payment method. After you receive your user ID and password, you may log into each tax account and change the contact, banking, and method of payment information.



# **Enrollment to File and Pay Tax Electronically (continued)**

			ou wish to: (select only one)	1 <b>3.</b> Do		
			Enroll for <b>both</b> filing returns and paying tax electronically?	$\circ$		
			Enroll <b>only</b> to pay tax electronically?	$\circ$		
			File returns and pay tax electronically <b>without</b> enrolling?	$\circ$		
			u are enrolling, select only one electronic payment method.	4. If y		
ount when you authorize the payment.	nk account when yo	ayment from your ban	ACH-Debit (e-check) – The Department's bank withdraws a p	$\circ$		
i authorize the bank to make the payment.  Ir bank to use this payment method.	en you authorize th by your bank to us	nt's bank account whe any costs charged b	ACH-Credit – Your bank transfers a payment to the Departme This is not a credit card payment. You are responsible for	0		
Contact Person for Electronic Payments:						
Ext. Fax #:	Ext.	Telephone #:	Name:			
			Mailing address:			
		Email address:	City / State / ZIP:			
Identification Number (PTIN):	er Tax Identificatio	Federal Prepare	A company employee A non-related tax preparer Payroll agent			
ts.)	ayments.)	erson for electronic pa	act Person for Electronic Return Filing (If different than contact per	6. Con		
Ext. Fax #:	Ext.	Telephone #:	Name:			
			Mailing address:			
_		Email address:	City / State / ZIP:			
dentification Number (PTIN):	er Tax Identificatio	Federal Prepare	A company employee A non-related tax preparer Payroll agent			
			ing Information (not required for ACH-Credit payment method):	<b>7</b> . Ban		
Business Checking	Business	Account type:	Bank / financial institution name:			
Personal Savings	Personal					
	umber:	Bank Routing Nu	account number:	Ran		
		Dank redaining rec	account nullipol.	Dan		
: :						

**Note:** Due to federal security requirements, we cannot process international ACH transactions. If any funding for payments comes from financial institutions located outside the US or its territories, please contact us to make other payment arrangements. If you are unsure, please contact your financial institution.

18. Enrollee Authorization and Agreement:

This is an Agreement between the Florida Department of Revenue, hereinafter "the Department," and the business entity named herein, hereinafter "the Enrollee," entered into according to the provisions of the Florida Statutes and the Florida Administrative Code.

By completing this agreement and submitting this enrollment request, the Enrollee applies and is hereby authorized by the Department to file tax returns and reports, make tax and fee payments, and transmit remittances to the Department electronically. This agreement represents the entire understanding of the parties in relation to the electronic filing of returns, reports, and remittances.

The same statute and rule sections that pertain to all paper documents filed or payments made by the Enrollee also govern an electronic return, or payment initiated electronically according to this agreement.



# Enrollment to File and Pay Tax Electronically (continued) I certify that I am authorized to sign on behalf of the business entity identified herein, and that all information provided in this section has been personally reviewed by me and the facts stated in it are true. According to the payment method selected above, I hereby

ally	authorize the Department to prese	ent debit entries into the bank account referenced o register for the ACH-Credit payment privilege an	above at the depository designated herein d accept all responsibility for the filing of payments					
tronic	Printed name:							
File and Pay Electronically	Signature:	Title:	Date:					
File and	Printed name:							
	Signature:(If account requires two signar	Title: tures)	Date:					
Aut	thorization for Email C							
	Your privacy is important to the Departr receive the information in an email, a w	nent of Revenue. The Department will mail information ritten request from you is required. This request allow quires additional steps before you can access the inf	ws the Department to send information using its					
	Complete this se	ection to receive information about this application by	secure email.					
Email Communication	I authorize the Department to send information regarding this Application using the Florida Department of Revenue's secure email. I understand that this method requires additional steps to view the information provided.							
Provide the name and contact information of the person who can respond to questions about this Application.								
Email C	Name:		Telephone #: Check if # is outside U.S. #: ext:					
	Email address:							
Αp <sub>l</sub>	plicant Declaration and	d Signature						
	officer or director of a corporation who	directs any employee of the corporation to do so, is p Department of Revenue, plus a penalty equal to twi	ax, fee, or surcharge, and willfully fails to do so, or any personally liable for the tax, fee, or surcharge evaded, ce the amount of the tax, fee, or surcharge due that is					
Applicant Declaration and Signature	I understand that, in addition to any other civil penalties provided by law, it is a criminal offense to fail or refuse to collect a required tax, fee, or surcharge; to fail to timely file a tax, fee, or surcharge return; to underreport a tax, fee, or surcharge liability on a return; or to give a worthless check, draft, debit card order, or other order on a bank to transfer funds to the Florida Department of Revenue.							
	I understand that I must notify the Florida Department of Revenue of any change in the form of ownership of this business or a change in business activities, location, mailing address, or contact information for this business.							
claration	I certify that I am authorized by(Officer/Director) to execute this application. I understand that I will be creating a tax account that may result in the responsibility to file returns and to pay a tax, surtax, fee, or surcharge to the Florida Department of Revenue.							
plicant De	Under penalties of perjury, I declare that I have read the foregoing Application and that the facts stated in it are true.							
Ap	Printed name:	Title: _						
	Signature:	Date:						



### Before you submit your completed application

#### Have you:

- · Provided your business identification numbers?
- · Completed all sections of this application?
- · Signed and dated this application?
- Included all additional applications, if required?

Mail to: Account Management MS 1-5730

Florida Department of Revenue

5050 W Tennessee St

Tallahassee FL 32399-0160

#### **Contact Us**

You may also bring your completed application to your nearest taxpayer service center. To find a taxpayer service center near you, visit **floridarevenue.com/taxes/servicecenters**.

Information, forms, and tutorials are available on the Department's website at **floridarevenue.com**.

For written replies to tax questions, write to:

Taxpayer Services MS 3-2000 Florida Department of Revenue 5050 W Tennessee St Tallahassee FL 32399-0112 To speak with a Department representative, call Taxpayer Services at 850-488-6800, Monday through Friday, excluding holidays.

#### Subscribe to Receive Updates by Email

Visit **floridarevenue.com/dor/subscribe** to sign up to receive an email when the Department posts:

- · Tax Information Publications (TIPs)
- Proposed rules, including notices of rule development workshops and emergency rulemaking
- Due date reminders for reemployment tax and sales and use tax

#### References

The following documents were mentioned in this form and are incorporated by reference in the rules indicated below.

The forms are available online at **floridarevenue.com/forms**.

Form DR-1	Florida Business Tax Application	Rule 12A1.097, F.A.C.
Form DR-1S	Registration Application for Secondhand Dealers and Secondary Metals Recyclers	Rule 12A-17.005, F.A.C.
Form DR-18	Application for Amusement Machine Certificate	Rule 12A-1.097, F.A.C.
Form DR-16A	Application for Self-Accrual Authority/ Direct Pay Permit Sales and Use Tax	Rule 12A-1.097, F.A.C.