

For office use only

NM TRD ID# 0 - -00-

DATE ISSUED

NTTC ONLY  
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1. BUSINESS NAME

2. DBA

3. Federal ID No.

4. Telephone- Business ( )

5. Other ( ) Fax ( )

6. Business E-mail Address

7. Type of Ownership (check one)

- Corporation
- Estate
- Government
- Indian Tribe
- Individual / Proprietorship / Sole Owner
- Limited Liability Company (LLC)
- Non Profit Organization Exempt 501 (c) \_\_\_\_\_
- Partnership
  - General
  - Limited
- S Corporation
- Trust

8. Mailing Address

City State Zip Code

9. Principal Business Location

City State Zip Code

10. Date business activity started or is anticipated to start in New Mexico

11. Date business will close (only if you check "Temporary" in box 12)

Month Day Year

Month Day Year

12. Select CRS Filing status:
- Monthly
  - Quarterly
  - Semiannual
  - Temporary
  - Seasonal
- If seasonal, indicate month(s) in which you will file:

13. Will business pay wages to employees in New Mexico?  
Yes  No

14. List Owners, Partners, Corporate Officers, Association Members, or Shareholders. If listing a business other than an individual, please see instructions. (Attach additional pages if necessary.)

SSN \_\_\_\_\_

Name & Title \_\_\_\_\_

Home Address \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

SSN \_\_\_\_\_

Name & Title \_\_\_\_\_

Home Address \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

15. Method of accounting

- Cash
- Accrual

16. Liquor License Type and No.

17. Public Regulatory Commission No.

18. Contractor's License No.

- 19. Will business sell Gasoline?  Yes  No
- 20. Will business sell Special Fuels?  Yes  No
- 21. Will business sell Cigarettes?  Yes  No
- 22. Will business sell Tobacco Products?  Yes  No

- 23. Will business engage in Severing Natural Resources?  Yes  No
- 24. Will business engage in Processing Natural Resources?  Yes  No
- 25. Will business be a Water Producer?  Yes  No
- 26. Will business be involved in Gaming Activities?  Yes  No

NOTE: If you answered Yes to any of the above, except Gaming Activities, please complete a Special Tax Registration Form.

27. If applicable, provide former owner's

NM TRD ID No. \_\_\_\_\_  
Business Name \_\_\_\_\_

28. Are you operating any other business (es) in New Mexico?  Yes  No

If yes, give: NM TRD ID No. \_\_\_\_\_  
Business Name \_\_\_\_\_

29. Primary type of business in NM (Check all that apply)

- Accommodation, Food Services, and Drinking Places
- Administrative and Support Services and Waste Management and Remediation Services
- Agriculture, Forestry, Fishing and Hunting
- Arts, Entertainment and Recreation Management
- Construction
- Educational Services
- Finance and Insurance
- Government
- Health Care and Social Assistance
- Information
- Manufacturing
- Mining and Oil and Gas Extraction
- Professional, Scientific and Technical Services
- Real Estate and Leasing of Real Property
- Rental and Leasing of Tangible Personal Property
- Retail Trade
- Transportation and Warehousing
- Utilities
- Wholesale Trade
- Other Services

30. Give a brief description of nature of business

31. I declare that the information reported on this form and any attached supplement(s) is true and correct.

Print Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Signature \_\_\_\_\_