



NEW JERSEY VOLUNTARY DISCLOSURE FACT PATTERN FORM

1) Type of Business entity:

- Corporation, accounting period ending: _____;
- Limited Liability Company;
- Limited Partnership;
- Individual;
- other (specify): _____

If LLC or other, what form is filed for Federal Tax purposes: _____

2) Has this entity been authorized to do business in the State of New Jersey with the New Jersey Secretary of State/New Jersey Division of Revenue – Commercial Recording or created under New Jersey Law?

- yes
- no

3) Did this entity receive a Nexus Questionnaire or any other notification from New Jersey:

- no;
- yes, explain: _____

4) Taxes currently registered in New Jersey for:

- NONE
- Sales and Use;
- Corporation;
- Partnership;
- Withholdings;
- Personal Income;
- other (specify): _____

5) Taxes requested for Disclosure:

- Sales and Use. Were Sales Taxes collected but not remitted?
 - no;
 - yes, specify first date: _____
- Corporation;
- Partnership;
- Withholdings;
- Personal Income;
- other (specify): _____

Date activity first commenced in New Jersey: _____

Type of business activity: _____



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Contact Person name: _____

Firm Name: _____

Mailing address: _____

Phone number: (_____) _____

Fax number: (_____) _____

E-mail address: _____

Signature: _____

Date: _____

Return this form to:

Ella Dillon, Auditor
New Jersey Division of Taxation
PO Box 269 (regular mail service) -
or- 50 Barrack St 5th Floor (courier
only) Trenton, NJ 08695-0269
phone: 609-984-7413
fax: 609-633-2681
e-mail: Ella.Dillon@treas.nj.gov