



# APPLICATION TO OBTAIN CERTIFICATE OF GOOD STANDING

NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER  
SFN 60035 (Revised 10/11)

1. Taxpayer Legal Name		2. Federal Employer I.D. Number (FEIN) or Social Security Number	
3. Doing Business As Name (if different from line 1)		4. Business Telephone Number	
5. Mailing Address	City	State	ZIP Code
6. Organization Type			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> General Partnership <input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Government <input type="checkbox"/> Association			

### Check the appropriate box(es):

- Authorization To Disclose Tax Clearance Information.** The Tax Commissioner is authorized to disclose confidential tax information on file with the Office of State Tax Commissioner to the below-designated individual or firm with respect to tax clearance.

### Designated Individual (or Firm)

Name of Individual (or Firm)		Telephone Number	Fax Number
Street Address	City	State	ZIP Code
E-mail Address			

- Authorization To Disclose Tax Information Using Facsimile or E-mail.** The Tax Commissioner is authorized to use facsimile or e-mail, or both, to disclose confidential tax information on file with the Office of State Tax Commissioner to the above-designated individual or firm with respect to the above-identified matters.

**Authorized Signature.** I declare under the penalties of North Dakota Century Code ch. 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this application, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete application.

Print Name of Authorized Individual	Title	Telephone Number
Signature		Date

**Privacy Act information.** In compliance with the Federal Privacy Act of 1974 (Public Law 93-579), the disclosure of an individual's social security number on the North Dakota income tax return and any required schedules is mandatory and is required under subsections 1 and 7 of North Dakota Century Code §57-38-31. An individual's social security number is used as an identification number by the North Dakota Office of State Tax Commissioner for file control and recordkeeping purposes, and for cross-checking an individual's files with those of the Internal Revenue Service.

Mail to: Office of State Tax Commissioner  
Business Registration  
600 E. Boulevard Ave., Dept. 127  
Bismarck, ND 58505-0599

Contact: Fax: (701)328-0332  
Phone: (701)328-1241  
Web site: [www.nd.gov/tax](http://www.nd.gov/tax)  
Email: [taxregistration@nd.gov](mailto:taxregistration@nd.gov)