

**REGISTRATION
PLACES FOR EATING TAX**

Due by: April 15, 2015

**Village of Matteson
4900 Village Commons
Matteson, IL 60443
(708) 283-4900**

Business Name: _____

Doing Business As: _____

Address: _____

City/State/Zip: _____ Phone #: _____

FEIN: _____ IL Sales Tax #: _____

Please review the attached Summary and the Places for Eating Tax Ordinance before answering the following questions:

1. Is your business responsible for payment of the Places for Eating Tax?

Yes _____ No _____

If **Question 1** is answered “**No**”, please complete Question 2, sign the registration and return to the “Village of Matteson, Attn. Places for Eating Tax” address above.

If **Question 1** is answered “**Yes**”, skip Question 2, complete rest of registration, sign and return registration to the “Village of Matteson, Attn. Places for Eating Tax” address above.

2. Please list reason(s) why you believe your business is not liable for collection and payment of the Places for Eating Tax:

Mailing Name: _____

Address: _____

City/State/Zip: _____ Phone #: _____

Date Business Commenced (or is anticipated to commence): _____

Current frequency of filing Illinois Sales Tax Return:

Monthly _____ Quarterly _____ Annually _____

Under penalties as provided by law, I declare that to the best of my knowledge and belief, the information on this form is true, correct, and complete.

Signature

Printed Name & Title

Date