

TELEPHONE LINE TAX

Registration Form

City of San Jose – Finance Revenue Management 200 E. Santa Clara Street San Jose, CA 95113 Phone (408)535-7055 Fax (408)292-6488 www.csjfinance.org

Please Check One:	Please Ind	Please Indicate Provided Service(s):	
Initial Registration	Telepho	one VOIP	
Change of Ownership	Cellular	Other	
Update Information	Start Date	Start Date In San Jose	
Name of Company			
Business Address	Str	reet	
City Mailing Address (if different)	State	zip Code	
City	State	e Zip Code	
Owner Information Tax Manager /	Name	Phone	
Preparer Information	Name	Phone	
Additional Contact	Name	Phone	
declare under penalty of per orrect.	jury that all of the information prov	ided in this registration form is true and	
	Signature	Print Name & Title	