

STATE OF WEST VIRGINIA

Department of Revenue
State Tax Department

WV-GSR-01

(Rev. 05/09)

RETURN THIS FORM (ALONG WITH THE WV-ARI-001 AUTHORIZATION TO RELEASE INFORMATION) EITHER BY FAX 304-558-8643 OR MAIL TO:

Administrative Support Unit
WV State Tax Department
Internal Auditing Division
1001 Lee Street East
Charleston, WV 25301
Phone: 304-558-0678, 304-558-8618, 304-558-8695, 304-558-1114

DATE: _____

FAX 304-558-8643

This is to request a Certificate of Good Standing from the West Virginia State Tax Department for:

Tax Identification Number: _____

Complete Business Name: _____

Business Location Address: _____

Mailing Address: _____

Is the business a Partnership? _____ Yes _____ No

Is the business a Sole Ownership? _____ Yes _____ No

Is the business a Corporation / LLC? _____ Yes _____ No

If none of these apply, what type of business Registration do you hold with West Virginia?

If you would like the response to be returned to you by facsimile, please note your fax number here:
(_____) _____ otherwise - it will be mailed to the address provided.

We do not fax this information to the Secretary of States office or the ABC Commission

I also understand that the secrecy provisions of the West Virginia Tax Procedure and Administration Act (WV Code §11-10) prevent the Tax Department from disclosing any information without having a waiver of confidentiality. I am completing the waiver (form ARI-001) and attaching it to this request.

I also understand that in the event that this business is not in good standing with the Tax Department I will be notified in writing as to what tax returns or tax payments are considered not filed or paid and who to contact with any questions regarding that situation.

Signature and Title of Person Requesting the Letter of Good Standing:

Signature: _____

Title: _____ Phone: _____