



1222204013

ST-C 214-1 (REV.8/12)



Georgia Department of Revenue
Sales Tax Contracting Unit
1800 Century Blvd. NE
Atlanta, GA 30345
Phone: 1- 877-423-6711
Fax: (404) 417-6610
E-mail: TSD-sales-tax-contractors@dor.ga.gov
Website: etax.dor.ga.gov

This application is not to be construed to discharge any obligation, bonded or otherwise imposed by section 48-8-6 3 Only original bonds, signed & notarized can be accepted. Bond not accepted for contracts less than \$10,000.

NONRESIDENT CONTRACTOR'S APPLICATION FOR AUTHORIZATION TO PERFORM
Contract or Job Number: _____

Form with fields: STN, Beginning Date of Activity, Bond Number, Date of Release (for Department use only)

Form with fields: Name of Business, Street Address, City, State, ZIP Code, Type of Ownership, Person For Whom Contract is to be Performed, Street Address, City, State, ZIP Code, Job Location, City, County, Type of Contract Work to be Performed, Beginning Date, Anticipated Date of Job Completion, Total Cost of Contract

In order for your application to be processed, please include the \$10 registration fee and Bond at 10% of the contract price.

Application must be completed in full and remittance enclosed

Type of Remittance: [] Cashier Check [] Certified Check [] Postal Money Order

Signature _____ (Signature of Owner or Partners. If Corporation, Authorized Officer must sign.)

Printed Name _____

Title _____

Email _____

Contact name _____

Contact phone number _____