



Business Occupational Tax Submittal System

BOTSS

Department of Revenue - Instructional Guide

Version 3.5 - January, 2015

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Introduction to BOTSS

Purpose

Georgia House Bill 1093, (Act 655, 6/2/10) authorizes the Georgia Department of Revenue (Department) to receive business occupational tax information from Georgia county and municipality governments ("Governments") to ensure compliance with sales and use tax registration requirements.

The purpose of this Guide is to provide Governments with the technical information necessary to implement the required electronic reporting to submit this information.

Program Overview

The Department has named this project the Business Occupational Tax Submittal System ("BOTSS"). BOTSS is owned and maintained by the department. The methods of transmitting records to the Department must comply with the standards developed by the Department as stated in this Guide. BOTSS applies to all Governments authorized to submit business occupational tax information to the Department. Governments include, but are not limited to:

City Governments Municipality Governments County Governments

Authorized Governments that elect to participate are to submit the minimum business information required (see BOTSS File Record Layout, page 16). Once a government submits the minimum business information, the Department will send login information to the Georgia Tax Center (GTC) to the Governments. The Governments may then submit their records on GTC, either individually or by a batch process. BOTSS will process the data and compare it with the records of the Department. For reported businesses registered for a Sales and Use Tax account with the Department, no action will be taken. For businesses not registered for a Sales and Use account with the Department, appropriate action will be taken to determine whether registration is required and to ensure compliance.

Getting Started

- 1. Pass a resolution authorizing participation in the program
- 2. Email a copy of the resolution to Sharon.doughty@dor.ga.gov
- 3. The Department will send you a User Name and initial Password
- 4. Login to https://gtc.dor.ga.gov and create your account

Initial Login

Visit website at: https://gtc.dor.ga.gov

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				LOGIN	
				Username Required Password Required	red
				Authorization Code	
	S. A.			SIGN UP	
	Quick Links	Individual	Business	Create my username Why create a username?	
	- Where's my refund?	Find an existing real	quest 🗮 F.A.Q.	Video tutorials	

- 1. Enter the emailed Username and Password (Authorization Code is not necessary upon initial login)
- 2. Login
- 3. You will be prompted to change Password after Login

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	MENU	EXPIRED PASSWORD			
		New Password		Password Rules	
	Home	Confirm Password	Required	Password must be 8-16 alphanumenc characters with at least one special character (non- alphanumeric) and one number. A special	
	Back	Required		character is a character that is not a number or a letter. ! @ # \$ % ^ & * () <> [][]. etc.	
	Help	Submit			
	NAVIGATION				
	Logon				
	» Pwd Recovery				
	HELP				
	FAQs				
	Video Tutorials				

1. Change initial **Password** by following Password Rules

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	MENU	PROFILE INFORMA	TION REQUIRED			Sa	Ve	
	Home	Web Logon	3140LAGR	Country	USA	• Type Required		
	Back	Web Name	Required	Phone 1 Required		+1		
	Help	Secret Question	Mequired	Phone 2	USA	+1		
	NAVIGATION	New Question Answer	Required					
	Logon	Confirm	-					
	Pwd Recovery							
	» Profile							
	HELP							
	FAQs							
	Video Tutorials							

- 1. You will automatically be taken to the Profile Information screen
- Update Profile information (Create a Web Name of your choosing)
- 3. Change Security Question and Save

**(You will need to change and remember Security Question to reset the password)

Georgia Tax Center - Technical Specifications

GTC Process Flow

The following steps describe an overview of how a submitter's records are sent, processed and returned by BOTSS. After the registration process is completed, the authorized Government submitter can log into GTC at <u>https://gtc.dor.ga.gov.</u>

There will be two options available to the submitter:

- Upload BOTSS File
- Submit / Data Enter BOTSS Request

Upload BOTSS File

BOTSS submitters have access to submit one file type, "BOTSS Submission." This file structure matches the layout defined on Page 16 – BOTSS File Record Layout. The file naming convention is the Submitter ID. When the file is attached to the request, validations are executed to check the file for correct line lengths, data types, etc. All errors will be presented to the submitter for correction. If there are no errors, an immediate acknowledgement will be presented to the submitter. See next page for screenshots.

Upload BOTTS File Cont.

This request allows submitters to upload BOTSS files following BOTSS record layout format from page 16.

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		NAMES AND ADDRESSES	I WANT TO Profile	
Homo	STI 20225459401 My Balance \$0.00	DBA Name Add	Upload BOTSS File Enter BOTSS Data	
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nep				
NAVIGATION	ACCOUNTS ⁰ REQUESTS ⁰ E-MESSA	GES ⁰ LETTERS ⁰		
» My Accounts	MY ACCOUNTS		Hide History Filter	
HELP	Account Id Account Type	Name Frequency Address	Balance	
FAQs	-			
Video Tutorials				
	Department of Revenue Trucking Por	tal Frequently Asked Questions Instructions/Videos		
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1. From home screen Select **Upload BOTSS File** (from I WANT TO tab on top right)

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MENU Log Off Home	Submit Cancel Elick here to upload your file ATTACHMENTS Add Attachment
Back Help	Type Filename Size Description
NAVIGATION	
My Accounts >> Request: BOTSS File Upload	
HELP	
FAQs Video Tutorials	-
	Department of Revenue Trucking Portal Frequently Asked Questions Instructions/Videos Georgia Department of Revenue © 2014 All rights reserved
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- 1. Select Click here to upload your file
- 2. Enter Description i.e. Cook County
- 3. Attach file to upload
- 4. Select Submit

For example, for a submitter ID of C037COOK, the upload file name would be "CO37COOK.TXT"

Submit/ Data Enter BOTSS Request

This request allows submitters to data enter BOTSS data individually. Various rules are in place to ensure valid submissions. Once the request is submitted and processed, the data will be formatted appropriately.

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			A	Usernane Required Password Alphorization Code	9
				Login Porporting Second	
	Quick Links	Individual	Business	Create my username Why create a username?	
	-• Where's my refund?	Find an existing re	equest F.A.Q.	Video tutorials	

- 1. Enter the Username and Password (Authorization Code not needed)
- 2. Select Login

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MENU	STI	20225459401	Legal Name CITY OF TUCKER	Upload BOTSS File		
Home	My Balan	ce \$0.00	DBA Name Add	Enter BOTSS Data		
Return to the home scree	en		Address 30084-1435	View All Accounts		
Help			Mailing Address Add			
NAVIGATION	ACCOL	INTS ⁰ REQUESTS ⁰ E-MESS	AGES ⁰ LETTERS ⁰			
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1. Select Enter BOTSS Data

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	MENU Log Off	BOTSS DATA		s	ubmit Save and finish later Cancel	
	Home Back	Add BOTSS Data Below BOTSS Records Records	11	R Dat	naka ihin Darord – 🚔 Conu muu – 🗟 Add a Bacard	
	Help NAVIGATION	Enter BOTSS Information Business Legal Name	Required	Required	ae ans record 📲 Cupy row 🔶 Add a Record	
	My Accounts » Request: BOTSS Submission	DBA Name Business Start Date NAICS FEIN	Required Required			
	HELP	Sales Tax Number Ownership Type Code Mailing Address		Business Locati	nn Addraes	
	Video Tutorials	Street Required		Street City		
		State GEORGIA	ZIP Required	State	ZIP	
		Owner/Officer Informatio	n First Name	L.	ast Name	
	~	Department of Revenue Georgia [Trucking Portal Frequently Department of Revenue © 2	Asked Questions Instructio	ns/Videos	

- 1. Select Add a record
- 2. Data-enter each line of BOTSS Information for the required fields
- 3. Select **SUBMIT** once data entry is complete

GTC Password Requirements / Reset Instructions

The requirements for passwords and password reset are as follows:

- Password must be a minimum of 8 characters
- Strong passwords are required. (Uppercase, lowercase, numeric and special characters)
- Secret question(s) must be answered to reset the password.
 - What street did you live on in third grade?
 - What is the middle name of your oldest child?
 - What is the middle name of your oldest sibling?
 - What is your maternal grandmother's maiden name?
 - o What school did you attend for sixth grade?
 - o In what city or town was your first job?
 - What was the name of your first stuffed animal?
 - What was your childhood nickname?
 - In what city or town did you meet your spouse/significant other?
 - o In what city or town did your mother and father meet?

Updating or changing passwords and/or Security Questions



1. Select the Forgot your password Link

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	MENU	RESET PASSWORD		Cancel	
	Home	Username:	Next		
	Back		Required		
	Help				
	NAVIGATION				
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	» Pwd Recovery				
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	FAQs				
	Video Tutorials				

1. Enter your Username and select the next button

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		Staging	
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	MENU	Cancel Cancel	
	Home	5370SUGA	
	Back	In what city or town did your mother and father meet?	
	Help	Submit	
	NAVIGATION		
	Logon	Instructions to complete the password recovery process will be emailed to you after successfully answering your secret question.	
	» Pwd Recovery		
	HELP		
	FAQs		
	Video Tutorials		

1. Answer Security Question and select **Submit**

Instructions to complete the password recovery process will be emailed to you after successfully answering your secret question.

BOTSS File Record Layout

BOTSS GEORGIA CITY/ COUNTY FILE RECORD LAYOUT

File Name				Record Size				
[4 C	HAR COUNTY	/CITY COD	E] HB1093EFILE		833			
	Re	ecord Sou	rce		Record Type			
		Submitter			TXT			
ITEM NO.	FIELD POSITION	FIELD SIZE	FIELD TYPE A= Alphabetic X = Alphanumeric N=Numeric	FIELD DESCRIPTION [***Fields in Bold Mandatory***]	ADDITIONAL INFORMATION			
1	1 – 60	60	Х	Business Legal Name				
2	61 – 120	60	Х	DBA (<i>Doing Business As</i>) Name				
3	121	1	BLANK FILL	RESERVED	Blank Fill			
4	122 – 161	40	Х	Mailing Address Line 1				
5	162 - 201	40	Х	Mailing Address Line 2				
6	202	1	BLANK FILL	RESERVED	Blank Fill			
7	203 - 222	20	A	Mailing City				
8	223 - 224	2	A	Mailing State				
9	225 - 233	9	N	Mailing ZIP				
10	234	1	BLANK FILL	RESERVED	Blank Fill			
11	235 - 274	40	Х	Business Location Address Line 1	if different from mailing addr			
12	275 - 314	40	Х	Business Location Address Line 2				
13	315	1	BLANK FILL	RESERVED	Blank Fill			
14	316 - 335	20	A	Business Location City	if different from mailing addr			

15	336 - 337	2	А	Business Location State	if different from mailing addr
16	338 - 346	9	N	Business Location ZIP	if different from mailing addr
17	347	1	BLANK FILL	RESERVED	Blank Fill
18	348 - 356	9	Ν	Sales and Use Tax Identification Number (if registered)	If business is, or previously was, registered
19	357 - 362	6	Ν	NAICS (North American Industry Classification Code)	
20	363 - 371	9	N	FEIN (Federal Employer Identification Number)	
21	372 - 374	3	N	Ownership Type Code	Ownership Type CodesCodeDescription000Default003Corporation012Partnership of Unknown Type013Proprietorship154Sole Proprietor014Limited Liability Corporation010General Partnership
22	375	1	BLANK FILL	RESERVED	Blank Fill
23	376 - 384	9	N	Owner/Officer SSN_1	
24	385 - 424	40	А	Owner/Officer First Name_1	
25	425 - 464	40	А	Owner/Officer Last Name_1	
26	465	1	BLANK FILL	RESERVED	Blank Fill
27	466 - 474	9	N	Owner/Officer SSN_2	
28	475 - 514	40	A	Owner/Officer First Name_2	
29	515 - 554	40	А	Owner/Officer Last Name_2	
30	555	1	BLANK FILL	RESERVED	Blank Fill
31	556 - 564	9	N	Owner/Officer SSN_3	
32	565 - 604	40	А	Owner/Officer First Name_3	
33	605 - 644	40	А	Owner/Officer Last Name_3	
34	645	1	Blank Fill	RESERVED	Blank Fill

35	646 - 654	9	N	Owner/Officer SSN_4	
36	655 - 694	40	A	Owner/Officer First Name_4	
37	695 - 734	40	A	Owner/Officer Last Name_4	
38	735	1	BLANK FILL	RESERVED	Blank Fill
39	736 - 744	9	N	Owner/Officer SSN_5	
40	745 - 784	40	A	Owner/Officer First Name_5	
41	785 - 824	40	A	Owner/Officer Last Name_5	
42	825	1	BLANK FILL	RESERVED	Blank Fill
43	826 - 833	8	N	Business Start Date	DDMMYYYY (EX: 10042014) If unknown, zero fill (EX: 0000000)

BOTSS Contact Information

For business related inquiries, please contact Donnie Walton at <u>Donnie.Walton@dor.ga.gov</u> or 404-417-6365 or Rufus Payne at <u>Rufus.Payne@dor.ga.gov</u> or 404-417-6548.

For technical related inquiries, please send an e-mail to DOR-BOTSS-SUPORT@dor.ga.gov.

Copies of resolutions regarding BOTSS participation should be emailed to <u>Sharon.Doughty@dor.ga.gov</u>