Department of Revenue Services State of Connecticut 450 Columbus Blvd Ste 1 Hartford CT 06103-1837

TPG-138 (Rev. 01/18)

TPG-138

Application to Become a Third-Party Bulk Filer

To register to become an approved Third-Party Bulk Filer (TPBF), provide the following information.

Business name Mailing address City Contact person Email address		Federal Employer Identification Number (FEIN) Connecticut Tax Registration Number (if available)				
					State	ZIP code
		Telephone number Fax number				
					I will use TPBF to electronically transmit:	
		Income Taxes		Busine	ss Taxes	
☐ Individual Income: Form CT-1040ES and Form CT-1040 EXT	☐ Withholding: Form CT-8109; Form CT-945; Form CT-1096; Form 1099;					
☐ Trust and Estate: Form CT-1041ES and Form CT-1041EXT ☐ Corporation Business: Form CT-1041EXT ☐ S		Form CT-WH; Form CT-941; Form CT-W3; and Form W-2 Sales and Use: Form OS-114 Attorney Occupational: Form 472				
					Form CT-1120; Form CT-1120ES; and Form CT-1120 EXT	• •
☐ Composite Income: Form CT-1065/CT-1120SI and Form CT-1065/CT-1120SI EXT	☐ Admissions and Dues: Form O-372 ☐ Business Entity: Form OP-424					
Payments Only						
□ Payments Only	□ Room	Occupancy:	Form OP-210			
By submitting this application, the party named above in filing returns on the behalf of Connecticut taxpayers the party named above to act on behalf of Connecticut the party named above authority to act as an agent of relationship would exist between the party named above All returns must be timely filed and paid electronically System. As a TPBF, the party named above has the other through the key and send method or to send an electronical transport of the send and electronically the send and send method or to send an electronical transport of the send and electronical transport of the send	. This application that the Department on the Internoption to enter onic file that co	on in no way x disputes. The of Revenue t(s). et using the Ceach client's f	grants power of a is application doe Services (DRS). Connecticut Electrifiling information i	attorney for s not grant Any agent ronic Filing ndividually		
Note: One electronic payment cannot cover multiple ac	ccounts.					
Print your name, sign, and fax this application to DRS a	at 860-297-47 6	1 or mail your	request to:			
Electronic 450 Colum	nt of Revenue of Commerce Un abus Blvd Ste T 06103-1837	it				
Print Name of Authorized Representative	Title					
Signature of Authorized Representative	Date					

After your application has been processed, DRS will mail you a package containing a bulk filer identification number, temporary password, and additional information.