



# SUT Voluntary Disclosure Agreement (VDA) Checklist

VDA Number:

Disclosure Period:

Initial Contact Date:

Please note: This checklist is intended to aid you in tracking the information required throughout the SUT VDA process. The checklist is for your use only and should not be submitted to the Department.

 Required Information	Date Provided to the Department
SUT VDA Application	
Company Name	
FEIN	
Effective Date	
SUT Account Number	
OBG Registration Confirmation Number	
Completed Spreadsheet	
Signed Agreement	
Calculation of Tax Due	
Calculation of 10% penalty due (if applicable)	

### Type of Vendor's License

- Sales Tax (county vendor's license)
- Seller's (out-of-state sellers only)
- Consumer's Use Tax

**DO NOT MAIL THIS DOCUMENT TO THE DEPARTMENT OF TAXATION.**