Electronic Funds Transfer (EFT) Credit Application

Issued under P.A. 122 of 1941. Filing is mandatory if you wish to pay by EFT.

INSTRUCTIONS: Use this form to notify us that you intend to file electronically. You may begin electronic filing after you receive our approval. Voluntary EFT filers will be required to transmit their tax monthly.

Taxpayer Name (Type or Print)			Taxpayer Identification Number		
Address		State		ZIP code	
Contact Person	Contact Person Telephone Number	ntact Person Telephone Number		Contact Person Fax Number	
Indicate the type of tax(es) you will be paying	by EFT:				
Tax Type and Tax Code					
Witholding - Employer and Retirement (01100) Corporate Income Tax Estimates (02170)					
Michigan Business Tax Extensions (02355) Corporate Income Tax Extensions (02370)				Tax Extensions (02370)	
Michigan Business Tax Annual (02655)	Tax Annual (02655) Flow Through Withholding Corporation Quarterly (02010)				
Single Business Tax Annual (02671)		Flow Thr	ough With	holding Individual Quarterly (02020)	
Sales Tax (04200)		Flow Thr	ough With	holding Annual (02675)	
Use Tax on Sales and Rentals (04400)		Use Tax	on Purcha	ses (04500)	

The Michigan Department of Treasury will approve requests for EFT Credits if you agree to follow the adopted format. See Form 2329, *Instructions for Payments of Michigan Sales, Use, Withholding, and Michigan Business Taxes Using EFT Credits.* We recommend you electronically send a test (zero dollar or \$.01 transmission, completely formatted) before actual filing can begin.

Authorization for EFT Credits

I agree to follow the formats adopted by the Michigan Department of Treasury for sales, use, withholding and Michigan business tax payments. I agree						
to notify Treasury in advance of any change in my filing method.						
Signature of Responsible Officer	Title	Date				

Please be aware of officer, member or partner liability as provided in Michigan Compiled Laws 205.27a(5):

"If a corporation, limited liability company, limited liability partnership, partnership, or limited partnership liable for taxes administered under this act fails for any reason to file the required returns or pay the tax due, any of its officers, members, managers, or partners who the department determines, based on either an audit or an investigation, have control or supervision of, or responsibility for, making the returns or payments is personally liable for the failure......"

CERTIFICATION

Corporations, partnerships, LLP's or LLC's must complete this section before this form can be processed. This officer, member or partner certification must be resubmitted when there is a change in the individual responsible for filing and/or paying Michigan taxes.

Check the appropriate box: New Application Recertification - change in individual responsible for Michigan taxes					
Signature of Corporate Officer, Partner, or Member responsible for reporting and/or paying Michigan Taxes Date					
Type or Print	Title				

All information requested above must be complete and accurate before your application is processed. Mail or fax the completed application to the Michigan Department of Treasury for approval. Once approved, you will receive instructions for remitting electronic payments. Please allow 4 weeks for processing.

TREASURY USE ONLY				
Treasury Approval	Date			
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If you have any questions, contact the Michigan Department of Treasury at (517) 636-4730. You may fax this form to (517) 636-4356, or mail this form to: **Michigan Department of Treasury Sales, Use and Withholding Taxes P.O. Box 30427**

Lansing, MI 48909