

# Electronic Filing Waiver Request

---

Complete this form to request a waiver if you are unable to file and/or pay electronically, or need more time to do so.

Waivers may be granted for up to one tax year and will expire with the June tax period due in July. If you need additional time once the waiver period ends, you must submit a new waiver request.

## **Business Information**

**Tax Preparers submitting requests for multiple businesses** - Provide **your** contact information below. Attach a list of all businesses represented in this request and include the Business Name, Sole Proprietor Name if applicable, and Federal Employer Identification Number (FEIN) of each. The Approval or Denial letter will be sent to the business.

All others provide the information requested below.

Business Name: \_\_\_\_\_

If a Sole Proprietor, First and Last Name of Owner: \_\_\_\_\_

FEIN: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Tax Type** Check each tax type that applies to your request.

- Form ST-7, Virginia Business Consumer's Use Tax Return
- Form ST-8, Virginia Out-of State Dealer's Use Tax Return
- Form ST-9, Virginia Retail Sales and Use Tax Return

**Reason for Waiver** Check the reason a waiver is being requested and provide all information.

- No Computer
- No Internet Access Available in Area
- Need More Time – Provide the specific reason and the date you expect to be ready. \_\_\_\_\_  
\_\_\_\_\_
- Business Closed / Closing – Provide the date the business closed or is closing. \_\_\_\_\_
- Other – State the specific reason \_\_\_\_\_  
\_\_\_\_\_

**Fax to: (804) 367-3015      OR      Mail to: Virginia Department of Taxation  
Waiver Requests  
P.O. Box 27423  
Richmond, VA 23261**