Utility User Tax Provider Registration

Date service began in the unincorporated area of Sacramento County ________________________________

1. Utility Service Provider Information:

   Utility Service Provider Name: ________________________________

   Address: ________________________________ Fax: ________________________________

   City: ________________________________ State: ______ Zip: ________________________________

   *Provider Contact: ________________________________

   Please Print Name ____________ Title

   *Contact Phone Number: ________________________________

   Utility Provided: Gas ☐ Electricity ☐ Telephone ☐ Cable ☐

   If Telephone: Local ☐ Long Distance ☐

   Note: Sacramento County does not apply the Utility User Tax to cellular service.

2. Utility User Tax Return Preparation:

   *Preparer Name: ________________________________

   Please Print Name ____________ Title

   Company Name: ________________________________ *Phone: ________________________________

   (if third-party tax preparer)

   Address: ________________________________ Fax: ________________________________

   City: ________________________________ State: ______ Zip: ________________________________

3. Registration Form Completed By: ________________________________

   Please Print Name ____________ Title

   ________________________________ Date Completed ________________

   Signature

Return the completed registration form to:
Sacramento County Report & Account Services, 700 H St. Room 1710 Sacramento, CA 95814.
If you have any questions, please contact Report & Account Services Unit staff at (916) 874-7844.

* Must be completed with names and telephone numbers of reachable people.