



MISSOURI DEPARTMENT OF  
**REVENUE**  
**No Tax Due Request**

Department Use Only  
(MM/DD/YY)

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Missouri Tax I.D.  
Number

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Federal Employer  
I.D. Number

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Social Security  
Number

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Name of  
Business

Doing Business  
As Name (DBA)

Business Mailing  
Address

City

State

Zip

Contact  
Person

Telephone  
Number

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**I am required to provide a No Tax Due Certificate for the following:**

Please indicate for which city or county you are requesting the No Tax Due. You must have a registered sales location in that city or county.

City

OR

County

Reason for request (Select the appropriate box below):

- Business License   
  Egg License   
  Liquor License   
  Fireworks License   
  Frozen Dessert  
 Kennel License   
  Lodging License   
  Pharmacy   
  Picnic License

If you need a No Tax Due Certificate for any other reason, you can contact the Tax Clearance Unit at (573) 751-9268. If you need a **FULL** Tax Clearance, please fill out a Request for Tax Clearance ([Form 943](#)).

Reason For No Tax Due

Person authorized to  
receive this information

Title

Telephone  
Number

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E-mail  
Address

Fax  
Number

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Address

City

State

ZIP

Authorization and Signature

Signature of  
Owner or Officer

Title

Printed Name of  
Owner or Officer

Telephone  
Number

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E-mail  
Address

Fax  
Number

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**Mail, Fax,  
or E-mail to:** Taxation Division  
P.O. Box 3666  
Jefferson City, MO 65105-3666

**Phone:** (573) 751-9268  
**TDD:** (800) 735-2966  
**Fax:** (573) 522-1265  
**E-mail:** [taxclearance@dor.mo.gov](mailto:taxclearance@dor.mo.gov)

Form 5522 (Revised 09-2014)



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Visit [dor.mo.gov/faq/taxation/business/tax-clearance.html](http://dor.mo.gov/faq/taxation/business/tax-clearance.html) for additional information.