

Tax Preparer and Payroll Service Provider Filing Frequency Verification Transmittal

Submit this form to verify the filing frequency for your new or existing clients.

**Fax your request to (804) 367-2603 or mail it to: Virginia Department of Taxation
P.O. Box 1114
Richmond, VA 23219**

Your Name: _____ Phone Number: _____

Company: _____

Relationship to Taxpayer: _____

Attach a separate list with the following identifying information for each client:

- FEIN (Federal Identification Number)
- Business Name
- Business Address
- Current Filing Frequency (if known)

For questions or assistance with this form please call (804) 367-8037.