CITY OF ARLINGTON, TEXAS
SHORT-TERM MOTOR VEHICLE
TAX PAYER INFORMATION SHEET
(PLEASE PRINT ALL INFORMATION)

RENTAL COMPANY NAME: _____

OWNER IDENTIFICATION:
☐ Sole Owner ☐ Limited Liability Partnership
☐ General Partnership ☐ Corporation
☐ Other (please specify) _____

REGISTERED AGENT OF COMPANY: _____

PRESIDENT OF COMPANY: _____

FEDERAL EMPLOYERS IDENTIFICATION NUMBER: _____

RENTAL COMPANY OWNER: _____

PROPERTY LOCATION(S): _____

PROPERTY OWNER: _____

TAXPAYER NAME: _____

MAILING ADDRESS: _____

_____

_____

REPORTING CONTACT NAME / PHONE NUMBER / EMAIL ADDRESS (Please print):

_____

_____

_____