



# ITR-1 Request for Tax Clearance

## Read this information first

- Form ITR-1 will not be processed until all returns are filed and balances paid (including penalty and interest, if applicable).
- Allow at least 10 business days for processing of Form ITR-1.
- If you are selling or have sold your business assets, do not complete Form ITR-1, Request for Tax Clearance. You must complete Form CBS-1, Notice of Sale or Purchase of Business Assets.
- If you need assistance in completing Form ITR-1, you can contact us at **1 800 732-8866** or at the address listed below.

**Note:** By completing the email address fields below, you are authorizing the Illinois Department of Revenue to send confidential information through internet email. Internet email replies from the Illinois Department of Revenue are not binding on the Department and create no rights under the Taxpayer Bill of Rights. The Illinois Department of Revenue assumes no liability for lost, eavesdropped, or otherwise misused information provided in the email. Please refer to the Department's Privacy Policy for additional information.

## Step 1: Identify yourself or your business

1 Name: \_\_\_\_\_

2 Doing business as (DBA): \_\_\_\_\_

3 Street address: \_\_\_\_\_  
City, state, ZIP: \_\_\_\_\_

4 Telephone (include area code): (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

5 Federal Employer Identification number (FEIN): \_\_\_\_ - \_\_\_\_ - \_\_\_\_

6 Illinois Account ID: \_\_\_\_\_ - \_\_\_\_\_

7 Social Security number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

8 Excise Tax License number: \_\_\_\_\_

9 Date business started in Illinois : \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Month Day Year

10 Do you make retail sales in Illinois?  yes  no

11 Do you maintain an office in Illinois?  yes  no

12 Do you have employees in Illinois?  yes  no

13 If this tax clearance is to be sent to a third party, provide the following:  
Name: \_\_\_\_\_  
In-care-of name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Number and street or post office box  
City, state, ZIP: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

## Step 2: Check the taxes for which you are requesting tax clearance

- |   |  |
|---|--|
| <input type="checkbox"/> Business Income Tax    | <input type="checkbox"/> Retailers' Occupation Tax (including sales and use taxes) |
| <input type="checkbox"/> Withholding Income Tax | <input type="checkbox"/> Hotel/Motel Tax   |
| <input type="checkbox"/> Individual Income Tax  | <input type="checkbox"/> Automobile Renting Tax                                    |
| <input type="checkbox"/> Vehicle Use Tax        | <input type="checkbox"/> Excise Tax. Specify: _____                                |

## Step 3: Check the reason you are requesting tax clearance

- |  |   |
|--|---|
| <input type="checkbox"/> Real estate transaction               | <input type="checkbox"/> Required by a state other than Illinois    |
| <input type="checkbox"/> Bank closing                          | <input type="checkbox"/> License renewal required by another agency |
| <input type="checkbox"/> DCEO incentive. Please explain: _____ |   |
| <input type="checkbox"/> Other. Please explain: _____          |   |

## Step 4: Sign below

An owner or officer of the business requesting the tax clearance must complete this step. Signature stamps are not acceptable.

**Note:** If you have been appointed as power of attorney for the taxpayer requesting this tax clearance, you must attach a copy of your power of attorney that specifically states your authorization in tax related situations. See Form IL-2848, Power of Attorney.

Sign: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_      Print title: \_\_\_\_\_  
Month Day Year      Title (i.e., president, owner, partner, individual)

Print name: \_\_\_\_\_      E-mail Address: \_\_\_\_\_

## Step 5: Send your request

Mail to: **PROBLEMS RESOLUTION DIVISION  
ILLINOIS DEPARTMENT OF REVENUE  
PO BOX 19014  
SPRINGFIELD, IL 62704-9014**

Or email to: **rev.prd@Illinois.gov**

**Note:** This tax clearance does not preclude assessment for any liability for pending, current, or future taxes or liabilities that may be established by present or future audits conducted by the department.