

Application for Marketplace Provider Waiver

phone: (608) 266-2776 • email: DORTOBRegistration@wisconsin.gov • website: revenue.wi.gov

Marketplace Provider Information			
Marketplace Provider Name		Shared Brand Name with Marketplace Sellers (if applicable)	
Address		City	State Zip
Contact Person and Title		Telephone Number () -	Email Address
Wisconsin Seller's Permit Number	Federal Employer Identification Number	Website Address	

Provide information below on all marketplace sellers that the marketplace provider is requesting a waiver. This can be provided in another format (e.g., spreadsheet attached in an email) as long as it contains all the information requested below for each marketplace seller.

Marketplace Seller Information			
Marketplace Seller Name			
Address		City	State Zip
Contact Person		Telephone Number () -	Email Address
Wisconsin Seller's Permit Number 456 -	Federal Employer Identification Number	Website Address	

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