



Complete this form to request a waiver if you are unable to file electronically.

Waivers will be valid for five years after the first filing due date after the waiver is granted. An application for a waiver must be submitted before a return or report is due.

**Taxpayer Information**

<input type="checkbox"/> FEIN <input type="checkbox"/> SSN	Taxpayer Name
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**Tax Type or Report** (check all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Alcoholic Beverage Tax                                | <input type="checkbox"/> Mining License Tax        |
| <input type="checkbox"/> Cigarette & Tobacco Tax                               | <input type="checkbox"/> Motor Fuel Tax            |
| <input type="checkbox"/> Commercial Passenger Vessel Tax                       | <input type="checkbox"/> Oil & Gas Production Tax  |
| <input type="checkbox"/> Corporate Income Tax (including Partnerships)         | <input type="checkbox"/> Oil & Gas Property Tax    |
| <input type="checkbox"/> Fisheries Related Taxes* ( <b>see listing below</b> ) | <input type="checkbox"/> Telephone Cooperative Tax |
| <input type="checkbox"/> Gaming  | <input type="checkbox"/> Tire Fee                  |
| <input type="checkbox"/> Marijuana Tax   | <input type="checkbox"/> Vehicle Rental Tax        |
|  | <input type="checkbox"/> Other _____               |

**Reason for Waiver** Check the reason a waiver is being requested and attach any additional supporting information.

- No Access to a Computer
- No Internet Access Available in Area
- Other – State the specific reason \_\_\_\_\_
- \_\_\_\_\_

***I declare under penalty of unsworn falsification that this application has been examined by me, and to the best of my knowledge and belief is true, correct and complete. I affirm that the above taxpayer does not have the capability of filing electronically due to the reason(s) listed above.***

Signature	Date / /
Printed Name	Phone Number
Title	

\* Includes Fisheries Business, Fishery Resource Landing, Seafood Marketing Assessment, Salmon Enhancement Tax, Regional Seafood Development Tax, Dive Fishery Management Assessment, Common Property Fishery Assessment, and Alaska Salmon Price Report

Mail completed waiver to:  
**Alaska Department of Revenue, Tax Division, PO Box 110420, Juneau AK 99811-0420**  
 www.tax.alaska.gov • 907.269.6620