

## State of Rhode Island Division of Taxation Form TPO-1



13122599990101

## Warwick Airport Parking District Permit Application

Operator name			Federal employer identific	cation number/social security number
DBA name			For the period:	
				I/DD/YYYY
Mailing address			Parking permit number	
City, town or post office	State	ZIP code	E-mail address	
only, term or poor emec	Julio			
Any person, partnership, corporation, joint venture, firm, individual proprietorship or other entity who provides transient parking in the Warwick Airport Parking District (as defined in RI Gen. Laws 1-6-1) is required to file this application and pay the appropriate fee with the Rhode Island Division of Taxation.				
Ownership type:				
Sole proprietorship Corporation				
Partner	rship	Other		
Physical address of parking facility in Warwick:				
Number of parking spaces available for transient parking:				
Under popultion of porium, I declare that I had	ave exemined this e	polication, and to the be	eat of my knowledge and b	plief it is true, accurate and complete
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, accurate and complete.  Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Authorized officer signature  Print name  Date  Telephone number				
Authorized officer signature	Pill	nt name	Date	releptione number
Paid preparer signature	Pri	nt name	Date	Telephone number
Paid preparer address	City, town or	post office State	ZIP Code	PTIN