Department of Revenue
Washington State

Reset This Form

VEHICLE LICENSING LOCAL USE TAX CORRECTIONS

Serial Number _____ Contact Person _____

Registration Number _____ Phone Number _____

Period/Year _____ City/County _____

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Print Name _____ Signature _____

Title _____ Date _____

Line Code	Total Local Use Tax Due	Location Code
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Line Code	Total Local Use Tax Due	Location Code
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