

CITY OF FLINT  
INCOME TAX DEPARTMENT

**NOTICE OF CHANGE OR DISCONTINUANCE**

ACCOUNT NUMBER (FEIN)	CHANGES EFFECTIVE ON (Date)
CURRENT LEGAL NAME	CHANGE LEGAL NAME TO:
DBA	CHANGE DBA TO:
CURRENT LEGAL BUSINESS ADDRESS	CHANGE LEGAL BUSINESS ADDRESS TO:
MAILING ADDRESS	CHANGE MAILING ADDRESS TO:

**Instructions: Place an "X" in all boxes that apply. Complete all information for that change.  
Write any comments or explanations on back of form.**

1. The Internal Revenue Service assigned us Federal Employer Identification Number: \_\_\_\_\_

2. Our Federal Employer Identification Number is wrong. The correct number is: \_\_\_\_\_

3. We have incorporated. Our corporate name is: \_\_\_\_\_

4. Our new corporate Federal Employer Identification Number is: \_\_\_\_\_

5. Discontinue our withholding tax registration:

We no longer have any business activity in the City of Flint.

We closed our business on: \_\_\_\_\_

We sold our entire business on: \_\_\_\_\_ We sold our business to: \_\_\_\_\_

We sold part of our business on: \_\_\_\_\_

\_\_\_\_\_ Their FEIN is: \_\_\_\_\_

6. Address and phone number where we may be reached following discontinuance of business:

\_\_\_\_\_ CONTACT PERSON \_\_\_\_\_ STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ PHONE \_\_\_\_\_

7. Change in ownership. (Please explain on back)

8. Effective \_\_\_\_\_, we changed our fiscal year ending from \_\_\_\_\_ to \_\_\_\_\_  
MONTH/YEAR MONTH MONTH

9. Other changes. (Please explain on back)

SIGNATURE OF PREPARER	PRINTED NAME OF PREPARER	DATE PREPARED	PREPARER'S PHONE NUMBER
		( )	<b>-MAIL THIS NOTICE</b>