



BUSINESS CLOSURE OR CHANGE OF OWNERSHIP

Business Account #

Business Name:

Owners Name:

Phone #

Email:

Business Closed

Date:

Retired Deceased Lack of Business Other

Business Sold

Date:

Land/Building Equipment

New Owner(s) Name:

Phone #:

Email:

I, , declare under penalty of perjury, that I am no longer conducting the above mentioned business in the unincorporated area of El Dorado County.

Print Name

Signature

Date

Any questions regarding this matter, please contact the Tax Collector’s Office at (530) 621-5800.

Tax Collector’s Office Use Only

Prime Updated by: _____ Date: _____ cc: Assessor’s Office Date: _____
Print Name & Initial