

## Notice of Change for a Business and/or Tax Account

TC-69C Rev. 6/24

**NOTE:** Do NOT use this form to register a new business or a new sales location. See instructions on page 4.

## **Account Information**

Provide your current account information on file with the Tax Commission.

Business name (if sole proprietor, your name):

Enter your Utah tax account number:

If you are a sole proprietor, enter your SSN:

All others, enter your Federal EIN:

## **Contact Information**

If we cannot identify your business we may try to contact you. Provide your contact info here.

Your name:			
Phone numbers	Daytime:	Cell:	
Email address:			

## PART A CHANGE BUSINESS INFORMATION

Use Part A to change information for your WHOLE BUSINESS.

If you want to close or change only a sales location/outlet, skip to page 3 and use Part B.

## Account Type(s) to Change

Mark only the tax account(s) affected by this change.

Fuel Taxes	Sales Taxes	Restaurant tax	Other Taxes	Radioactive waste
Aviation fuel	E-911 emergency srvcs.	Sales and use tax	Beer tax	Self-insurer's
Compressed natural gas	Energy	Sexually explicit business	Brine shrimp	Tobacco, cigarette, e-cig
Environment assur. fee	Locomotive fuel	Transient room	Corporate/partnership	Withholding (employer)
Hydrogen	Lubricating oil	Waste tire	Gross receipts	Withholding mineral prod.
Liquefied natural gas	Multi-channel video/audio		Insurance premium	IFTA
Motor fuel	Municipal telecom	Property Taxes	Mining severance	Special Fuel User
Special fuel supplier	MV rental tax	Centrally assessed	Oil & gas conservation	
	Prepaid disp. cell phones	Railcar	Oil & gas severance	
				PART A continued next page

# PART A continued from page 1 Business Change Details

A1.	Close your account WARNING: Entering a date here will close your whole tax account.				
	To close only a sales outlet, use Part B.				
	If you are closing a corporate account, attach a copy of your Articles of Dissolution from the Utah Dept. of Commerce.				
	Do you understand all account types marked on page 1 will be closed?       Yes:       No:       • You must file all tax returns for periods during which the account(s) was open.				
A2.	<b>Change an address</b> WARNING: Changing an address here will NOT change the address of a sales tax outlet/location. To do that, use Part B.				
	NEW address				
	City: State: ZIP:				
	Is this your corporate office address? Yes: No:				
	Is this your mailing address? Yes: No:				
A3.	Report a new phone number(s)				
	Day: Evening: Cell:				
A4.	• Change or add an email address         We will send all electronic mail to this address.         NEW email address				
A5.	Change your DBA/Business name Attach Dept. of Commerce Articles of Incorporation (unless you are a sole proprietor).				
	NEW name				
	What name is this? Legal business name: DBA:				
A6.	Add/remove an officer/owner Attach Dept. of Commerce Change Form.				
	Add (name and address): SSN:				
	Add (name and address): SSN:				
	Remove:				
A7.	Other business change				
	Explain:				

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## PART B CHANGE AN OUTLET/LOCATION

Use Part B to change or close an existin	g outlet/location where you make sales.
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Ou	tlet/location to Change If you are changing or closing a SALES TAX outlet, enter the outlet number	Sales tax out	ilet number
	If you are changing or closing a <b>TRANSIENT ROOM outlet</b> , enter the outlet number (the outlet number is printed on the sales tax license)		m outlet number
	If you are CLOSING a <b>CIGARETTE/TOBACCO outlet</b> , enter the license number	Cigarette/tob	acco license number
	If you are CLOSING an <b>E-CIGARETTE outlet</b> , enter the license number		cense number
	If you need to change more that one outlet, attach extra sheets in this format.		
B1.	Close the outlet/location		
	Closure Date		
B2.	Change a sales or transient room outlet/location's address Do NOT use this form for a cigarette/tobacco or e-cigarette address. Instead, go to tap.utah.gov and	click "Apply for	a tax account(s) - TC69"
	Prior physical address		
	City: State:		ZIP:
	NEW physical address		
	City: State:		ZIP:
B3.	Change the outlet/location's phone number		
	New number		
B4.	Other outlet/location change		
	Explain		

Authorized Signature	•		
Applicant or Owner: SIG	IN HERE	Date:	

## **TC-69C Instructions**

Use this form to report changes to an existing business already registered with the Tax Commission.

You can change your mailing address and close accounts online. Log into your tax account at **tap.utah.gov**.

**Do not** use this form to register a new business. Instead, go to **tap.utah.gov**, "Apply Online" section, "Apply for a tax account(s) - TC-69". Or use this QR Code and follow the instructions:



To register a **new sales outlet/location** for an existing sales tax account, use form TC-69B.

Get forms online at tax.utah.gov/forms

## **Form Instructions**

### **Account Information**

Provide your account information that is currently on file with the Tax Commission. We use this information to find your account.

### **Contact Information**

If we cannot find your account we will try to contact you. We may also contact you if we need more information to complete any of the actions on this form.

### Part A

Use Part A to change information for your whole business. If you are only trying to change information for a single outlet/location where you make sales, skip Part A and use Part B on page 3.

#### Account Type(s) to Change

Mark the box for each account type affected by the change you are reporting.

#### **Business Change Details**

Provide all the information about the changes you are making to your business account with the Tax Commission. Use Section A7, *Other Business Change,* to request a change not shown on this form.

### Part B

Use Part B to change or close a single outlet/location where you make sales.

If you need to change or close more than one outlet/location, attach additional sheets following this format.

WARNING: **Do not** use this form to change the address of a cigarette/tobacco or e-cigarette outlet. To do that, go to **tap.utah.gov** and click on "Apply for a tax account(s) - TC-69".

### **Authorized Signature**

Sign and date. We will not process this form without an authorized signature.

## **Return Form**

Return this form to:

Master Records Utah State Tax Commission 210 N 1950 W Salt Lake City, UT 84134-3310

or fax to 801-297-3573.

If you need an accommodation under the Americans with Disabilities Act, email **taxada@utah.gov**, or call 801-297-3811 or TDD 801-297-2020. Please allow three working days for a response.