

FOR ASSESSOR OFFICE USE ONLY	<u></u>
ACCOUNT NUMBER:	_ FISCAL YEAR:
BUSINESS LICENCE CLOSED DATE:	
TAX YEAR:TAXES PAID:	TAXES DUE:

OUT OF BUSINESS FORM

This form is requested on behalf of the Assessor's office to assist them in inactivating your personal property account.

Email: assessor@carson.org or Fax: (775) 887-2139

(PRINT CLEARLY)	
BUSINESS OWNER NAME:	· · · · · · · · · · · · · · · · · · ·
BUSINESS NAME (DBA):	BUSINESS PHONE:
SITE LOCATION:	
FORWARDING MAILING ADDRESS:	
CONTACT PERSON:	Title:
EMAIL ADDRESS:	PHONE (if different than above):
DID THE BUSINESS RELOCATE TO A	A DIFFERENT LOCATION? YESNO
If yes, please indicate new location of the	business:
DID YOU SELL THE BUSINESS: YES	NO
NAME OF THE COMPANY OR PERSO	ON THE BUSINESS WAS SOLD TO:
	
CONTACT INFORMATION OF PURC	THASER:
WAS THE EQUIPMENT INCLUDED I	N THE PURCHASE PRICE OF THE BUSINESS?
YES NO	
WAS THE EQUIPMENT SOLD SEPAR	RATELY? YESNO
If yes, price of the equipment	or estimated value of equipment:
WAS THE EQUIPMENT DISPOSED/D	ONATED/DESTROYED? YESNO
PERSONAL PROPERTY TAXES PAID	O IN FULL? YESNO
IF NO, PLEASE CONTACT THE ASSE	ESSOR'S OFFICE TO MAKE PAYMENT ARRANGEMENTS
(775) 887-2130 or assessor@carson.org	
SIGNATURE:	DATE:
TITLE:	