

# ACCOUNT UPDATE FORM

Date:

**Enter CURRENT License Information:**

|                        |                      |
|------------------------|----------------------|
| Account Number:        | <input type="text"/> |
| Business Name:         | <input type="text"/> |
| Business Address:      | <input type="text"/> |
| City, State, Zip Code: | <input type="text"/> |

**Enter CHANGES To License Information Below:**

**CANCEL MY LICENSE**

Reason for cancellation:

Last date business conducted (Liability End Date):

**Note:** The City of Phoenix PLT License is not transferable between owners or locations. A new license is required for any change in the ownership entity or for any change in physical business location, including relocations (i.e., business address changes). Therefore, when the business ownership entity is modified or the business relocates to a different address, the existing privilege license must be cancelled and a new privilege license must be obtained under the new entity ownership or new business location.. The corresponding license fees will apply.

- Mark the box "Cancel My License" above to cancel the account for the existing or previous entity ownership or business location.
- Submit a new Transaction Privilege (Sales) and Use Tax License application form ([phoenix.gov/finance/plt](http://phoenix.gov/finance/plt)) for the new entity ownership or business location.

**Change MAILING Address Information**

|                        |                      |
|------------------------|----------------------|
| Care of:               | <input type="text"/> |
| Street Address:        | <input type="text"/> |
| City, State, Zip Code: | <input type="text"/> |

**Change Officer, Member, or Management Company Information**

**Note:** If your ownership type has changed, such as from an LLC to a Corporation, or you have sold your business, the existing license account must be cancelled. A new application is required for the new ownership. The option to cancel your license appears at the top of this form.

|                        |                      |
|------------------------|----------------------|
| Name:                  | <input type="text"/> |
| Title:                 | <input type="text"/> |
| Street Address:        | <input type="text"/> |
| City, State, Zip Code: | <input type="text"/> |
| Phone Number:          | <input type="text"/> |

**Change RENTAL UNITS**

Residential Rental # of Units:

Commercial Rental # of Units:

**Change BUSINESS ACTIVITY** - Mark all the business activities that apply to your business.

- |  |   |  |   |
|--|---|--|---|
| <input type="radio"/> Advertising (ST 01)              | <input type="radio"/> Home/Speculative Builder (ST 32)    | <input type="radio"/> Residential Rental (ST 18) | <input type="radio"/> Short-Term Vehicle Rental (ST 21) |
| <input type="radio"/> Amusement (ST 12)                | <input type="radio"/> Hotel/Lodging <30 Days (ST 25)      | <input type="radio"/> Restaurants & Bars (ST 11) | <input type="radio"/> Telecommunications (ST 05)        |
| <input type="radio"/> Commercial Rental (ST 13)        | <input type="radio"/> Job Printing (ST 10)                | <input type="radio"/> Retail (ST 17)             | <input type="radio"/> Use Tax (ST 29)                   |
| <input type="radio"/> Construction Contracting (ST 15) | <input type="radio"/> Rental of Personal Property (ST 14) | <input type="radio"/> Retail Food Sales (ST 30)  | <input type="radio"/> Use Tax - Out of State (ST 31)    |

Other:

**The changes indicated on this form are true and complete to the best of my knowledge and I am authorized by the above-named business to complete this form.**

**REQUIRED Signature** \_\_\_\_\_ **Title** \_\_\_\_\_

**Print Name** \_\_\_\_\_ **Date** \_\_\_\_\_