



**Financial Services**  
Sales Tax Division 215 North  
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## SALES TAX ACCOUNT CHANGE FORM

Date: \_\_\_\_\_

City Account #: \_\_\_\_\_

Current Business Name on Account: \_\_\_\_\_

DBA: (Doing Business As) \_\_\_\_\_

Business Name Change: \_\_\_\_\_ DBA: \_\_\_\_\_

Business Address Change: \_\_\_\_\_

Mailing Address Change: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Mailing Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Do not send City of Fort Collins preprinted tax returns.

Closure Date: \_\_\_\_\_ Note: Engaged in business in Fort Collins means performing or providing services or selling, leasing, renting, delivering or installing tangible personal property for storage, use or consumption with the city

If business sold, name and phone number for new owner: \_\_\_\_\_

Effective Date of Change: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_