

# NC-AC Business Address Correction

## Account Information

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SSN or FEIN

Account ID

Effective date of change:

Legal Name

**Fill in all applicable circles:**

- All Business Accounts
- Franchise and Corporate Income
- Partnership
- Sales and Use\*
- Withholding
- Other

\*If you registered via the Streamlined Sales Tax Registration System, do not use this form. Any updates must be made at [www.sstregister.org](http://www.sstregister.org).

## Old Address

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Old Address

City

State

Zip Code

## New Address

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New Street Address

City

State

Zip Code

New Mailing Address *(if different from street address)*

City

State

Zip Code

If business has moved to another N.C. county, indicate new county:    Phone number: