Reset Print Form

DELAWARE DIVISION OF REVENUE
PO BOX 8750
WILMINGTON, DE 19899-8750

REQUEST FOR CHANGE
New Booklets Will Be Issued
for Account Number Changes Only

WREQ
0089-99

ACCOUNT NUMBER

BUSINESS NAME AND ADDRESS

ACCOUNT NUMBER CHANGE 1	EFFECTIVE DATE 2	REASON FOR CHANGE 3

4 CORRECT BUSINESS LOCATION ADDRESS

NAME		
ADDRESS		
CITY	STATE	ZIP CODE

5 CORRECT MAILING ADDRESS IF DIFFERENT FROM ABOVE

NAME		
ADDRESS		
CITY	STATE	ZIP CODE

AUTHORIZED SIGNATURE _____ DATE _____

TELEPHONE NUMBER _____ E-MAIL ADDRESS _____

(Revised 10/12/04)

Withholding
Request for Change Form

Use this form to make corrections or changes to your name, address, account number or taxable year-ending date. Also use this Request for Change form if you have gone out of business and indicate the date your business ceased operations.

Please Note: The Withholding Request for Change form only makes changes to your withholding account in our Business Master File. If you need to make similar changes to your Corporate, Sub S Corporate and/or License accounts, please complete the Corporate Request for Change form, the Sub S Corporate Request for Change form or the License Request for Change form respectively for each type of tax.

Step-by-Step Instructions

Step 1: Please enter your information as it appears on the Division of Revenue's current records

Box A. **Account Number –** Please enter the Federal Tax Identification Number that the Delaware Division of Revenue currently has on file for you.

Box B. **Business Name and Address –** Please enter the business name and location address that the Delaware Division of Revenue currently lists as your business name and location address.

Step 2: Fill-in any fields you wish to change on the Request for Change form below

Field 1. **Account Number Change –** If you wish to change the information in Box A, please enter your correct accountnumber in Field 1. Otherwise, leave Field 1 blank.

Field 2. **Effective Date –** Please enter the date you would like this Request for Change form to go into effect.

Field 3. **Reason for Change –** Please enter the reason you are submitting this Request for Change form (i.e. out of business, incorporated, moved).

Field 4. **New Business Location Address –** If you wish to change the information in Box B, please enter your correct location address in Field 4. Otherwise, leave Field 4 blank.

Field 5. **New Mailing Address –** Please enter your correct business mailing address.

Step 3: Sign and date the form. Mail to the address listed on the form or fax to 302-577-8203.

If you have any questions, please call the Delaware Division of Revenue Business Master File Section at 302-577-8778.