

## NC-BN Out-of-Business Notification

## **Account Information**

SSN or FEIN								
Account ID								
Legal Name								
Address								
City	State	Zip Code						
1. If permanently closed, enter the date closed.*								

2. If a seasonal business has temporarily closed, fill in circle(s) for months business is open:

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
0	0	0	0	0	0	0	0	0	0	0	0

You must file returns for the months the business is open.

## 3. Fill in each circle for accounts that are seasonal or closed:

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

Mail to: North Carolina Department of Revenue, P.O. Box 25000, Raleigh, North Carolina 27640-0001 (Do not send this form with a tax return.)