

P.O. Box 182382 Columbus, OH 43218-2382

Application for Tax Release Certificate

- General Information Full instructions available at tax.ohio.gov

 This form should only be used to request a release certificate for taxes with successor liability (most commonly Sales, Employer Withholding, and Commercial Activity Tax.)

 In Section 1, select other if this request is for Motor Fuel, Petroleum Activity, or Casino Tax.

- To qualify, a person must be selling their business, stock of merchandise, or assets.
 A tax release will be issued once the business or assets have been sold, all returns have been filed with liabilities paid, and if applicable, the liquor license has transferred.
- Send your completed form and Ohio Declaration of Tax Representative (TBOR 1) if applicable, to the mailing address, fax number or e-mail address listed at the bottom of this form. Allow 2-4 weeks for processing of this form

Section 1: Select the taxes for which you are requesting tax release				
Sales tax Employer	r withholding tax	Commercial activity tax	Other	
Section 2: Seller of business, assets, or stock of merchandise				
Name		FEIN and/or SSN		
DBA (if applicable)		Commercial activity tax number	Last day of business	
Current mailing street address		Withholding account number	Last payroll date	
City, State, ZIP code		Sales tax/vendor license number	Liquor permit number	
Telephone number		Fax number		
Section 3: Purchaser of business, assets, or stock of merchandise				
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Purchaser's name		Purchaser's FEIN or SSN		
Purchaser's address		Purchaser's Ohio tax account number(s)		
City, State, ZIP code		Date of sale or transfer		
	Disclosure Auth	norization: If requestor or certificate recipion	ent is a third party taxpayer	
Section 4: Authorized Signature representative, you must include a completed O				
An owner or officer of the business being sold must complete this section. If you have been appointed as representative for the taxpayer (seller), you must include a copy of your Ohio TBOR 1 that specifically states your authorization to request this tax release and receive all related correspondence from the Ohio Department of Taxation.				
Name		Signature	Signature	
Title		Date		

To submit this application, please use one of the following options:

Online Notice Response Service: tax.ohio.gov - Contact Us

-or- gateway.ohio.gov

eFax: (206) 984-0378 Phone: (855) 995-4422

Email: Taxreleasegroup@tax.ohio.gov

Mail:

Ohio Department of Taxation

Tax Release Unit P.O. Box 182382

Columbus, OH 43218-2382

Form Name: Tax Release Notice Response - TR REL