



# Business Discontinuation Form

Please print clearly using blue or black ink.

Type of Business Entity:

City ID / Account #: \_\_\_\_\_  
 Federal EIN / SSN: \_\_\_\_\_  
 Legal Name: \_\_\_\_\_  
 Trade Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City / State / Zip: \_\_\_\_\_

- SOLE PROPRIETORSHIP
- PARTNERSHIP
- CORPORATION
- S- CORPORATION
- LLC (SINGLE MBR, PARTNERSHIP, CORP, ETC)
- NON-PROFIT
- OTHER

HAS THE BUSINESS BEEN PERMANENTLY CLOSED?  YES  NO

IF YES, ENTER THE FINAL DATE OF BUSINESS ACTIVITY: \_\_\_\_\_

HAS THE BUSINESS BEEN SOLD?  YES  NO

IF YES, ENTER DATE OF SALE: \_\_\_\_\_

ENTER NAME(S) OF THE NEW OWNERS: \_\_\_\_\_

HAS THE BUSINESS MOVED OUTSIDE THE CITY OF PITTSBURGH?  YES  NO

IF YES, WHAT IS THE ADDRESS OF THE NEW LOCATION? \_\_\_\_\_

DATE OF MOVE: \_\_\_\_\_

WILL BUSINESS ACTIVITY BE CONDUCTED IN PITTSBURGH AFTER THE MOVE?  YES  NO

\*NOTE: IF A BUSINESS IS NO LONGER LOCATED IN THE CITY OF PITTSBURGH LIMITS, BUT PERFORMS ANY TYPE OF SERVICE - CONTRACTUAL OR OTHERWISE WITHIN CITY LIMITS, THAT BUSINESS MAY STILL HAVE TAX LIABILITY DUE TO PITTSBURGH.

IF YES, BRIEFLY DESCRIBE: \_\_\_\_\_

HAS THE BUSINESS ACQUIRED THE SERVICES OF A PAYROLL AGENT TO FILE YOUR RETURNS?  YES  NO

IF YES, NAME OF PAYROLL AGENT: \_\_\_\_\_

PAYROLL AGENT FEDERAL EIN: \_\_\_\_\_

**AFFIRMATION:**

I, \_\_\_\_\_, OF \_\_\_\_\_  
(PLEASE PRINT – OWNER / OPERATOR / OFFICER)                      (BUSINESS NAME)

DO HEREBY AFFIRM THAT THIS DOCUMENT HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IS TRUE, CORRECT AND COMPLETE.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

MAIL COMPLETED FORM TO: TAX INVESTIGATIONS, DEPT. OF FINANCE, CITY OF PITTSBURGH,  
 414 GRANT ST. RM 209, PITTSBURGH PA 15219

FAX: 412-255-6821  
 FOR INFORMATION: 412-255-2508