



Office of the Tax Commissioner

TAX DELETION/ INACTIVE FORM

Taxpayer Name: _____

Taxpayer ID#

--	--	--	--	--	--	--	--	--	--

Business Name: _____

Please be advised that as of: _____

- ☐ Business is no longer in operation.
- ☐ Business has been sold to: _____ Tel #: _____
Address of new owner: _____
- ☐ I am no longer Self Employed. New Employer - _____
- ☐ Other: _____

Please check applicable box below:

- ☐ Delete account (Accounts cannot be deleted where the Taxpayer has a debt).
The Office of the Tax Commissioner reserves the right to request proof of closure in accordance with section 13 of the Taxes Management Act 1976.
- ☐ Make account inactive (business is likely to re-open in the near future i.e. within 1 year).
Accounts will be automatically deleted after 1 year or (4 quarters) of inactivity. Failure to notify this Office that a previously inactive business has resumed operation is an offence subject to summary conviction under section 36 of the Taxes Management Act 1976.

Print name: _____ Mailing Address: _____

Signature: _____

Date: _____

Phone: _____ Email: _____

For office use only

- Is there a nil balance on the ledger? ☐ Yes ☐ No \$_____
- Have all returns been filled up to date of closure? ☐ Yes ☐ No
- Have all returns been updated? ☐ Yes ☐ No
- Was TP informed of outstanding amount? ☐ Yes ☐ No
- Was TCD informed of deletion/inactive? ☐ Yes ☐ No

Comments: _____

Form completed by: _____ Date: _____