<b>↓</b> For King County Department of Assessments Internal Use Only <b>↓</b>									
Account number	QC number	Year AV	Penalty	Future status	Processed by	Date			
		·		·					

King County Assessor King Street Center, 201 S Jackson Street, Room708, Seattle, WA 98104 Telephone: (206) 296-5126 Email: <u>personal.property@kingcounty.gov</u>

## KING COUNTY DEPARTMENT OF ASSESSMENTS ADVANCE TAX REQUEST FORM

Please provide the information requested on this form in the space below. A separate form should be completed for each account for which a tax statement is required. Attach the appropriate bill of sale showing a breakdown of the sales price (i.e., equipment, inventory, intangibles, etc.) with related dollar values. If you have questions, please call (206) 296-5126.

Requestor Information									
Company name:		Attention:State:Zip:							
Mailing address:		City:		State:	Zip:				
Telephone: ()	Email:	City: _ Email:							
Personal Property (Existing Busin	ness) Information								
Account number: Bi	Ov								
Mailing address:		City:		State:	Zip:				
Location address:		City:		State:	Zip: Zip:				
New Information									
Reason for request									
-	□ Closing business (please pro	vide forwarding address)							
□ Sale of business (please provide n			anation)						
		other (please provide exp							
Closing date:	New owner UBI:		Legal entity:						
Business information									
New business name:		New owner name:							
New mailing address:		City:			Zip:				
New location address:	City:		State:	Zip:					
Telephone: () New owner email:									
Sales breakdown									
Total sales price	Equipment L	easehold improvements	Intangibles		Other				