



**Department of
Taxation**

Please do not
use staples.

CAT CR Rev. 7/10
**Request to Cancel/
Reactivate Account**

CAT account number

FEIN/SSN

Use only UPPERCASE letters.

Reporting member's name

☐ Please cancel my CAT account effective (MM/DD/YY) / /

Reason for cancellation:

☐ Taxable gross receipts less than \$150,000

☐ Business closed. Date (MM/DD/YY): / /

☐ Bankruptcy. Case no: _____

☐ Organizational change. New FEIN: _____

☐ Sold/merged business. Please provide the following information regarding the company or individual to whom the business was sold or with whom the business merged:

Name of company/individual _____

Address of company/individual _____

FEIN of company/individual _____

CAT account no. of company/individual _____

Effective date of sale/merger (MM/DD/YY) _____

☐ Please reactivate my CAT account effective (MM/DD/YY) / /

Reason for reactivation: ☐ Gross receipts greater than \$150,000 ☐ Other _____

***Please note:** If reactivating a combined or consolidated taxpayer group, all members that were part of the group on the cancellation date will be reactivated. If group members have changed, please complete form CAT AR (Add/Remove a Member to/from Group).

SIGN HERE (required)

I declare under penalty of perjury that I am the taxpayer or the taxpayer's authorized agent having knowledge of the relevant facts in this matter to file this request to cancel/reactivate account.

► _____
Signature Date (MM/DD/YY)

_____ Name Title

Contact person: The taxpayer will be represented in the matter by the following individual. Please attach a Declaration of Tax Representative (Ohio form TBOR 1), which can be found on the department's Web site at tax.ohio.gov.

Your first name

M.I. Last name

Home address (number and street)

City

State

ZIP code

Telephone

Fax

Title

E-mail

Please send this request to Ohio Department of Taxation, Business Tax Division,
P.O. Box 16158, Columbus, OH 43216-6158 or fax to (206) 666-4462.