



\*0-0-3-099\*



**Wyoming Department of Revenue**  
Excise Tax Division  
122 W. 25th Street, Herschler Bldg.  
Cheyenne, Wyoming 82002-0110  
<http://revenue.wyo.gov>

***Sales/Use Tax Vendor Certificate of Business Discontinuation***

**The Undersigned hereby certifies:**

- 1. I am the holder of Wyoming sales tax license number \_\_\_\_\_
- 2. I no longer sell products or provide services subject to sales or use tax and am requesting my license be canceled effective this date: \_\_\_\_\_
- 3. I have completely discharged all my sales/use tax liability up to and including the date specified on line two (2.) above. (Note: This includes tax on all accounts receivable)
- 4. The business operated under the above sales/use tax license was sold in its entirety to:

\_\_\_\_\_  
\_\_\_\_\_

- 5. I will retain all business and financial records of the business operated under the above sales/use tax license for a period of three (3) years at the following location:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 6. I want any approved and authorized credits refunded to me.

**Note: Your sales tax license must be returned to the Department of Revenue along with this form and other applicable cancellation documents.**

\_\_\_\_\_  
Signature (Owner or Corporate Officer)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**This form should be printed, completed, and mailed to the Department of Revenue at the above address**