



CHANGE OF BUSINESS INFORMATION

USE THIS FORM TO REPORT ANY CHANGES IN YOUR BUSINESS NAME, ID NUMBERS, BILLING OR BUSINESS ADDRESS, OR TELEPHONE NUMBER. (SEE INSTRUCTIONS ON BACK BEFORE COMPLETING)

OLD INFORMATION

FEDERAL EIN	ACCOUNT ID	TRADE NAME (DBA, etc.)		
LEGAL NAME	CONTACT NAME		CONTACT NUMBER	
BUSINESS ADDRESS	CITY/TOWN	STATE	ZIP CODE	

NEW INFORMATION

FEDERAL EIN	ACCOUNT ID	TRADE NAME (DBA, etc.)		
LEGAL NAME	BUSINESS TELEPHONE NUMBER		BUSINESS FAX NUMBER	
TAXPAYER REPRESENTATIVE	OWNER	FORM OF BUSINESS (check one) <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership/LLC <input type="checkbox"/> Corporation		
BUSINESS ADDRESS	CITY/TOWN	STATE	ZIP CODE	
BILLING ADDRESS	CITY/TOWN	STATE	ZIP CODE	
CONTACT NAME	CONTACT NUMBER		EMAIL ADDRESS	

ACTIVITY CHANGE

- OUT-OF-BUSINESS
- INACTIVE IN BURLINGTON CITY LIMITS
- OTHER _____

EFFECTIVE DATE	DOCUMENTATION ATTACHED (See Instructions)
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DID YOU FILE A FINAL RETURN, INCLUDING YOUR COMPLETE CUSTOMER LIST? YES NO

I certify that this document has been examined by me, and is, to the best of my knowledge and belief, true, correct, and complete.

SIGN HERE ► _____
Signature
Title
Date

The purpose of Form ENV-1, Change of Business Information, is to provide a simple and convenient means for you to correct or update your business tax records. Please send us a completed Form ENV-1 whenever there is a change in your business's name, Federal EIN, billing or business address, telephone number, contact name, ownership, or form of business organization.

If there currently are no changes to your business' information, keep this form in your files. In the event a change occurs, complete the form and send it to us as soon as possible. If you need additional forms, call the Recycling Coordinator at 863.9094.

In the OLD INFORMATION section, enter your:

FEDERAL EIN: This is your Federal Employer's Identification Number used for tax and record-keeping purposes.

ACCOUNT ID: This is your Department of Public Works identifying number, and appears on your Solid Waste Generation Tax Return.

TRADE NAME: This is the name that you use in conducting your normal day-to-day business operation.

LEGAL NAME: Your legal name is the name under which your business owns assets or incurs debts. For sole proprietorships, it is the name of the proprietor; for corporations, it is the name filed with the Vermont Secretary of State; and for partnerships, it is the legal name used in the partnership agreement.

CONTACT NAME & NUMBER: The individual who should receive all phone calls and correspondence regarding your solid waste collection license and tax returns.

BUSINESS ADDRESS: The address where your major business activity is physically located.

BUSINESS TELEPHONE NUMBER: The telephone number where you can usually be reached during normal business hours.

In the NEW INFORMATION section, enter your new or revised:

FEDERAL EIN: If you have recently received an EIN or have otherwise changed your identification number, enter the new number here. (If there is no change, leave this space blank.)

ACCOUNT ID: (See above.)

TRADE NAME: (See above.)

LEGAL NAME: (See above.)

CONTACT NAME & NUMBER: (See above).

TAXPAYER REPRESENTATIVE: The person who handles tax matters for your business, and is authorized to file returns and receive notices. (If there is no change, leave this space blank.)

OWNER: The legal name of the new owner. (If there is no change, leave this space blank.)

FORM OF BUSINESS: This is the legal form of the taxpayer. Check only one box. (If there is no change, leave this space blank.)

BUSINESS ADDRESS AND TELEPHONE NUMBER: (See above).

BILLING ADDRESS: The address where your tax returns and notices should be mailed. Be sure to include your street name and number, city and post office box number, if any. (If there is no change, leave this space blank.)

In the ACTIVITY CHANGE section, check the appropriate box and enter:

EFFECTIVE DATE: For OUT-OF-BUSINESS, the date on which your business did or will cease all operations. For INACTIVE IN BURLINGTON CITY LIMITS, the date on which you serviced your last customer in Burlington.

DOCUMENTATION: For OUT-OF-BUSINESS, attach a Certificate of Dissolution if a corporation, or a notarized Affidavit if a partnership or sole proprietorship. For INACTIVE IN BURLINGTON CITY LIMITS, attach a notarized Affidavit.

FINAL RETURN: Indicate whether or not you have filed your final return of all taxes due.

SIGNATURE: Sign your name, and enter your title and the date in the space provided. Send your completed form to:

RECYCLING COORDINATOR
DEPARTMENT of PUBLIC WORKS
POST OFFICE BOX 849
BURLINGTON, VT 05402-0849

PRIVACY ACT NOTIFICATION

The Federal Privacy Act of 1974, as amended, requires all agencies requesting identifying numbers to inform individuals from whom they seek information why the request is being made and how the information is used. The disclosure of identifying numbers, including Social Security Numbers, is required by Section 14-14 of Burlington Code of Ordinances. Such numbers which are disclosed on any reports or return are used for tax administration purposes, and as may be required by law, or when the taxpayer gives written authorization to this department for another department, person, agency or entity to have access (limited or otherwise) to the information contained in his/her return.