

BUSINESS ACCOUNT STATUS CHANGE FORM
TANGIBLE PERSONAL PROPERTY
Indian River County Property Appraiser

Parcel Number # _____ Business Name/DBA _____
Business Owner _____

(Check Appropriate Box)

Mailing Address Site Address Business Name Closed Business Sold Business
 Asset Update/Request Tangible Personal Property Return Other _____

CHANGE OF MAILING ADDRESS:

From: _____ To: _____
Street Address _____ Street Address _____
City/State/Zip _____ City/State/Zip _____

CHANGE OF SITE ADDRESS (Physical Location of Business):

From: _____ To: _____
Street Address _____ Street Address _____
City/State/Zip _____ City/State/Zip _____

BUSINESS CLOSED:

Closing Date _____ All Assets Junked Yes ___ No ___
Assets Moved to Other Location Yes ___ No ___
Assets Sold Yes ___ No ___
Other _____ *(If Sold, See Asset Transfer Form)
** (If Business Closed, Request a Final TPP Return)

BUSINESS SOLD:

Date of Sale: _____ Buyer's Mailing Address:
Buyer's Name: _____ Street Address _____
Buyer's Phone Number: _____ City/State/Zip _____
Were Assets Included: Yes ___ No ___ *(If Sold, See Asset Transfer Authorization Form)
** (If Business Sold, Request a Final TPP Return)

Signature _____ Title _____
Print Name _____ Date _____
Phone Number: _____ Fax Number _____
Cell Phone Number _____ Email _____