IOWA
Department of Revenue

Iowa Business Tax Cancellation

Request for Cancellation of Tax Permit

revenue.iowa.gov

Did you know? You can log into GovConnectIowa to cancel your business tax account online. Find additional information at revenue.iowa.gov. Otherwise, complete this form and either mail or fax it to the Iowa Department of Revenue. Incomplete or outdated forms will not be accepted. If any information is illegible, the form will be returned.

For cancellations regarding alcohol, tobacco, and lottery licenses, log into GovConnectIowa.

1. Ownership information: Sole proprietorships or single member LLCs (individual-owned) require a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN). All other entities require a Federal Employer Identification Number (FEIN).

Legal name: _____

Doing business as: _____

Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN): _____

Federal Employer Identification Number (FEIN): _____

Headquarters or Primary Address: _____

City: _____ State: _____ ZIP: _____

2. Account or tax type(s): Check all that apply and provide the account ID (permit number).

☐ Sales and Use Tax account ID (permit number): _____

☐ Check this box to cancel the following without deactivating your Sales and Use account:

☐ Automobile Rental ☐ Hotel and Motel ☐ Household Hazardous Materials

☐ Vehicle Lease account ID (permit number): _____

☐ Water Service Excise Tax account ID (permit number): _____

☐ Income Tax Withholding account ID (permit number): _____

☐ Fuel Tax account ID or license number: _____

To cancel a Streamlined Sales Tax (SST) account, you will need to log into sstregister.org.

3. Effective date and reason for cancellation: _____

All returns must be filed up to the effective cancellation date. (The final due date is the end of the month following the cancellation date.) If left blank, the form will be returned.

4. Forwarding address: The forwarding address will be effective for all accounts or tax types listed above.

Address: _____

City: _____ State: _____ ZIP: _____

5. Signature:

I, the undersigned, declare under penalties of perjury or false certificate, that I have examined this form, and, to the best of my knowledge and belief, it is true, correct, and complete.

Signature must be signed by hand or via a digital signature with a digital certificate. Stamped or typed signatures are not accepted.

Signature: _____ Date: _____

Print name: _____ Phone: _____

Contact name: _____ Contact email: _____

To ensure secure processing, do not email forms to the Department. The integrity and security of sending personal information via fax cannot be guaranteed. By submitting this form via fax, you agree to hold the Department harmless if a fax results in third party access to the information.

Submit this form: by mail to Registration Services, Iowa Department of Revenue, PO Box 10470, Des Moines, IA, 50306-0470, or fax to 515-281-3906.

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