



COUNTY OF SANTA CRUZ
SHERI THOMAS - ASSESSOR
BUSINESS PROPERTY DIVISION
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Santa Cruz, CA 95060

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🌐 www.santacruzcountyca.gov/asr

Business Property Account Closure

Instructions: Complete and return this form to the Office of the Assessor to request **closure** of an existing business property account. The sale, removal or destruction of property after lien date (January 1) does not relieve the owner on January 1 of tax liability.

Account Information

Owner's Name: _____

Business Name (DBA): _____

Mailing Address: _____

Situs Address: _____

Assessor's Account Number(s): _____

Closure Information

Please check the appropriate box below and provide all requested information.

Sale of Business (to another party) Effective Date: _____

Buyer's Legal Name: _____

Buyer's Mailing Address: _____

Buyer's Business Name (DBA): _____

Closure of Business (business closed; did not relocate, was not sold) Effective Date: _____

Business moved out of Santa Cruz County Effective Date: _____

New Location (including Zip Code): _____

Duplicate Account

Primary Account Number: _____ Duplicate Account Number: _____

Contact Information

Contact Name: _____ Title: _____

Email Address: _____ Phone Number: _____

I certify (or declare) that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief.



Authorized Signature

Printed Name

Date Signed