



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DEPARTMENT OF REVENUE
DIVISION OF TAXATION
REGISTRATION SECTION
ONE CAPITOL HILL - SUITE 2
PROVIDENCE, RI 02908-5800

FINAL RETURN FORM

If you have discontinued or sold your business and are no longer making sales of tangible personal property at retail, complete this form and mail it to address above or fax it to (401) 574-8913.

Name Telephone No.

Address

City State Zip Code

1) Complete this section if the business has ceased operations:

Inactive Date: _____

Federal Employer's Identification No.: _____

Sales Tax Permit No. (if different): _____

Did you have employees Yes _____ No _____

2) If business was sold, provide purchaser's name, address and date sold:

Name Date Sold

Address

City State Zip Code

Person Completing this Form

Signature Title Date