



Alaska Municipal Sales Tax Program
 City of Unalakleet
 1 Sealaska Plaza, Ste 302
 Juneau, AK 99801



Unalakleet Business Closure Form

Part A - Closure Information

Account #:		Business Name:	
Last day of business in Unalakleet / closure date:			
Reason for Account Closure <i>(select all that apply)</i> :			
<input type="checkbox"/>	No longer conducting business in Unalakleet		
<input type="checkbox"/>	Sold rental property <i>(please complete New Owner Information section below)</i>		
<input type="checkbox"/>	Sold business <i>(please complete New Owner Information section below)</i>		
<input type="checkbox"/>	Other – Please explain:		

Part B – New Owner Information

New Owner Name(s):			
Mailing Address:			
City:		State:	ZIP:
Phone:		Email:	

Part C – Contact information & signature

Mailing Address:			
Phone:		Email Address:	
Company Representative:		Title:	
<i>Under penalties of perjury, I affirm that the information provided above is true and correct.</i>			
Signature:		Date:	

*This form may be returned to the Alaska Municipal Sales Tax Program via email at amstp@akml.org or by mail to AMSTP, One Sealaska Plaza, Ste 302 Juneau, AK 99801