

**FAILURE TO RETURN THIS FORM BY SEPTEMBER 1 WILL  
RESULT IN A 10% INCREASE IN ASSESSMENT AND A  
\$100.00 PENALTY (WV §11-3-12)**

---

---

1. Business Name & Location -- A physical address of the business not a PO BOX or mailing address.

Business Name: \_\_\_\_\_

Location: \_\_\_\_\_

2. Contact Person -- Name, address and phone number.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

3. Type of Business -- Be descriptive and precise (e.g. Automotive sales, Fast Food Restaurant, Attorney, etc.)

Type: \_\_\_\_\_

Federal Employers Identification Number: \_\_\_\_\_

4. *If out of business on July 1, 2020 make sure the following information is given.*

Was the business sold  or closed  ?

If business was **sold** include date of sale, **new owner** and their **address**.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Sale: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_

*If business was closed, what became of the business assets?*

Business assets were retained for personal use?

Sold to another business  (list name & address) or discarded?

Business: \_\_\_\_\_

Address: \_\_\_\_\_

Acquisition Date: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_

**FAILURE TO REPORT THE CLOSURE OF THE BUSINESS WILL RESULT IN CONTINUED ASSESSMENT AS A "NONFILER".**

- ❖ PLEASE DO NOT RETURN BLANK FORMS
- ❖ IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT ASSESSOR'S OFFICE AT (304) 234-3626. PLEASE KEEP THIS FORM ATTACHED AND COMPLETE ALL INFORMATION.