

Application Form for Business Suspension / Cancellation Registration By Profit-seeking Enterprise with Uniform Certificate (Entertainment Tax)

(Filled by Applicant)											
Profit-seeking Enterprise Universal Number											
Entertainment Tax Number											

Institute Applied				Application date	___/___/___(mm/dd/yy)			
Name of Profit-seeking Enterprise				Reception Document No.	No. _____ of Document Series of _____			
Business Address	No. _____, ___ Floor, Room _____, Alley _____, Lane _____, Section _____ of _____ Road / Street, _____ Li / Village, _____ Country / Town / City / District, _____ County / City							
Name of Person-in- charge		Household Address	No. _____, ___ Floor, Room _____, Alley _____, Lane _____,Section _____ of _____ Road / Street, _____ Li / Village, _____ Country / Town / City / District, _____ County / City					
Business Suspension / Cancellation Date	Business Suspension / Cancellation starting ___/___/___							
Business approval certificates	Returning one copy of original Profit-Seeking Enterprise Registration Certificate, and other certificates: _____					Stamp of Person-in-charge		
	Original Purchase Permit for Uniform Receipts is attached. (to be returned after cancellation)							
	_____ copy (-ies) of current monthly business sale amount report and tax amount payment report are attached.							
Business Suspension / Cancellation Registration reporting items	Inventory amount: NT\$ _____(List attached)							
	Fixed Asset Amount: NT\$ _____(List attached)							
Application items for Liquidation and Closing	Liquidation period: from ___/___/___ (mm/dd/yy) to ___/___/___ (mm/dd/yy)					Stamp of Person-in-charge		
	Closing period: from ___/___/___ (mm/dd/yy) to ___/___/___ (mm/dd/yy)							
	Liquidator's Name: _____							
	Relationship between Liquidator and Enterprise: _____							
	Other related items: _____							
Revenue Service Office will fill in this field and under				Approved by Level _____ Approved by _____ (undertaking unit)				
Application item	Business Suspension		Business resumption					
Code(Mark V)	11		25					
Change date		___/___/___ (mm/dd/yy)						
Note								
Telephone:								