



North Dakota Office of State Tax Commissioner
SALES & USE TAX PERMIT CHANGE OF ADDRESS FORM

Sales/Use Tax Permit No.		Phone	
Federal Identification No. (if applicable)		Social Security No. (if individual owner)	
Doing Business As			
Corporate, Legal, or Owners Name			
Old Mailing Address (Street or Post Office Box)			
City		State	Zip Code
New Mailing Address (Street or Post Office Box)			
City		State	Zip Code
Physical Address of Business (Street Address)			
City		State	Zip Code
Name (please print)		Title	
Signature		Date	
E-Mail Address			

Office of State Tax Commissioner
Registration Section
600 E. Boulevard Ave. Dept. 127
Bismarck, ND 58505-0599
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Web site: www.nd.gov/tax