



Address or Name Change Form

Use this form to notify the Department of Revenue by selecting the appropriate accounts for the address change.

To change the address for a specific physical location you operate or sell into, refer to your sales tax license for the 8 digit Colorado Account number followed by a 4 digit location (site) number and indicate in the boxes below. Be sure to include the effective date for the address change to avoid incorrect assessments of tax liability. If there are multiple address changes for multiple account types, please list the information on page 2.

Note: A new Federal Employer Identification Number (FEIN) assigned by the IRS or a change in ownership (and you are the new owner) will require a new Colorado Account Number. Please fill out a Colorado Sales Tax and Withholding Account Application (CR 0100) by visiting Tax.Colorado.gov/forms-in-number-order.

Revenue Online allows for convenient and secure access to conduct business with the Department of Revenue. If you have a login, you can also change your mailing address for certain accounts online at Colorado.gov/RevenueOnline.

Colorado Account Number (8-Digit Number)	FEIN or SSN/ITIN	Business Name or Last Name, First Name
Apply address change to account(s)		
<input type="checkbox"/> Withholding Tax <input type="checkbox"/> Gaming Withholding <input type="checkbox"/> Excise <input type="checkbox"/> Individual <input type="checkbox"/> Corporate <input type="checkbox"/> 1099 Withholding <input type="checkbox"/> Oil & Gas Withholding <input type="checkbox"/> IFTA <input type="checkbox"/> Partnership <input type="checkbox"/> Other (list account) _____		
<input type="checkbox"/> Sales Tax <input type="checkbox"/> Location (Site) Address Change Only		4 Digit Location (Site) Number to Change Effective Date of Change (MM/DD/YY)
Note: If your retail business location changed in the middle of a filing period, you must file a separate sales tax return for the taxes collected at each location		Change Main Address <input type="checkbox"/> Mailing Address <input type="checkbox"/> Physical Address <input type="checkbox"/> Both
Previous Address		Current Address
Previous Address		Current Address
City	County	City County
State	ZIP Code	State ZIP Code Phone Number
For business name change, provide a copy of the IRS SS-4 and/or Amended Articles of Incorporation from the Secretary of State. For individual name change, provide either a copy of your state ID or driver's license, social security card, marriage certificate, divorce decree, or court document		
Name Change	Current or Previous Name	New Name
<input type="checkbox"/> Legal <input type="checkbox"/> DBA		
Authorized Signature		Date

Email to: DOR_taxapplications@state.co.us, or
Mail to: Colorado Department of Revenue, Taxpayer Service Center,
 PO Box 17087, Denver, CO 80217-0087



221102 29999

Colorado Account Number (8-Digit Number)	FEIN or SSN/ITIN	Business Name or Last Name, First Name

Apply address change to account(s)

- Withholding Tax
 Gaming Withholding
 Excise
 Individual
 Corporate
 1099 Withholding
 Oil & Gas Withholding
 IFTA
 Partnership
 Other (list account) _____

Previous Address				Current Address			
Previous Address				Current Address			
City				County			
State	ZIP Code			Phone Number			

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 Gaming Withholding
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Previous Address				Current Address			
Previous Address				Current Address			
City				County			
State	ZIP Code			Phone Number			

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Previous Address				Current Address			
Previous Address				Current Address			
City				County			
State	ZIP Code			Phone Number			

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