



Business Closing Request for:

___ Sevierville Lodging Tax ___ Sevierville Amusement Tax ___ Sevierville Restaurant Tax

Please fill out the form below and return by fax 865-453-5518, or email to tlawson@seviervilletn.org. If you have any questions, please feel free to call me at 865-868-1561.

Business Name: _____

Doing Business as (dba): _____

Location Address/City/State/Zip: _____

Mailing Address/City/State/Zip: _____

Contact Name: _____

Email: _____

Phone Number: _____ Alternate: _____

Last day of business: _____ EIN: _____

If available, please provide the information for the new owner(s):

New owner information: _____

New owner name(s): _____

New owner phone & email: _____

Signed: _____ Date: _____