



Dipåtamenton Kontribusion yan Adu'aña

DEPARTMENT OF

# REVENUE AND TAXATION

GOVERNMENT OF GUAM

Gubetnamenton Guåhan

## NOTICE OF ACTION

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

License Type: \_\_\_\_\_ License No. \_\_\_\_\_

Expiration Date: \_\_\_\_\_ SSN/EIN: \_\_\_\_\_

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

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

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

Application for:      Amendment of License\*  
                          To read: “\_\_\_\_\_”  
                          (Please attach supporting documents)

Request for copy of license/ID\* (If lost/stolen ID, notarized affidavit required)

Transfer of license\*

Activation of license (Attach letter from Broker)

Inactivation of license

Relocation of business establishment to:\*

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

\*Applicable fee: \$ \_\_\_\_\_ Receipt #: \_\_\_\_\_

(DO NOT TYPE BELOW THIS LINE)

The above-stated applicant is hereby issued tax clearance for issuance of Amended Business License.

(1) General Licensing\*\*  
Branch Stamp Below

(2) BPTB/GRT  
Branch Stamp Below

(3) ITAPB  
Branch Stamp Below

(4) COLLECTIONS  
Branch Stamp Below

Cleared By: \_\_\_\_\_  
Date: \_\_\_\_\_

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

Cleared By: \_\_\_\_\_  
Date: \_\_\_\_\_

Cleared By: \_\_\_\_\_  
Date: \_\_\_\_\_

\*\*For corporations  
& LLCs only