



Dipåtamenton Kontribusion yan Adu'ána

DEPARTMENT OF

REVENUE AND TAXATION

GOVERNMENT OF GUAM

Gubetnamenton Guáhan

EDDIE BAZA CALVO, Governor Maga'láhi
RAY TENORIO, Lt. Governor Tifente Gubetnadot

JOHN P. CAMACHO, Director
Direktot
MARIE M. BENITO, Deputy Director
Sigundo Direktot

INSURANCE, SECURITIES, BANKING & REAL ESTATE BRANCH

NOTICE OF CANCELLATION

NAME: _____

Doing Business As (DBA) Name, if any: _____

SSN/EIN: _____ GRT Account Number: _____

Phone Number: _____ Date of Cancellation: _____

Type of License being Cancelled (Please indicate License Number):

- Insurance License (Indicate type, insurance company affiliation) _____
- Real Estate License (Indicate type and company affiliation) _____
- Securities License (Indicate type and company affiliation) _____
- Other License (Indicate type and company affiliation) _____

Mailing Address: _____ Email Address: _____

(Applicant Signature)

(DO NOT TYPE BELOW THIS LINE)

The above-stated applicant is hereby issued by tax clearance for issuance of New/ Renewal 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: _____

Cleared By: _____
Date: _____

Cleared By: _____
Date: _____

Cleared By: _____
Date: _____

*** For corporations & LLC only