



Dipattamenton Kontribusion yan Adu'ána

DEPARTMENT OF

# REVENUE AND TAXATION

GOVERNMENT OF GUAM

Gubetnamenton Guåhan

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

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

<h1>TAXI</h1>	CANCELLATION
	INCOME TAX BRANCH
APPLICANT:	
DATE:	
REQUEST THE CANCELLATION OF MY TAXICAB:	GROSS RECEIPTS TAX
TAXI NO:	
GRT NO:	
YEAR:	
MAKE:	
MODEL:	COLLECTIONS BRANCH
ENG #	
VIN. #	BUSINESS LICENSE BRANCH
TYPE:	
<input type="checkbox"/> CORPORATION <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> OTHER	
CERTIFICATION	WEIGHTS & MEASURES
I certify that the information provided herein are true and correct to the best of my knowledge. I understand that I am required to remove the taxi Meter and decalcomania from the door exterior of my taxicab.	
SIGNED:	
COMMENTS:	