# **M** DEPARTMENT OF REVENUE Notice of Business Transfer

Use this form to notify the Department of Revenue of an impending transfer of assets (*Minnesota Statutes 270C.57*). **Note:** If you prefer, you may send a copy of the lien and the applicable purchase agreement pages instead of using this form. **We reserve the right to request the entire purchase agreement if there are questions.** 

	Business Acquired							
	Name	Seller's Minnesota Tax ID						
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Seller	Address							
	City	State	ZIP Code					

## Lien Information

Date Filed	Lien Number	Amount
Location where recorded (e.g., Secretary of State's office, co	ounty recorder's office)	·

### **Purchaser (Successor)**

Name	Purchaser's Minnesota Tax ID		
Address			
City	State	ZIP code	

Lien

Purchaser

## Consideration and expected payment dates

Amount	Expected payment date
Amount	Expected payment date
Amount	Expected payment date

#### I declare that this information is true and complete to the best of my knowledge and belief.

			 	~	 	 	
Signature o	of Purchaser					Date	

Mail to: Minnesota Department of Revenue, Attn: Successor Liability, PO Box 64651, St. Paul, MN 55164-0651. If you have questions, call 651-556-3003 or 1-800-657-3909.

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