

**Form R-3**

**REGISTRATION INFORMATION CHANGE REQUEST**

It is faster and easier to change your business registration information online at [www.tax.virginia.gov/ireg](http://www.tax.virginia.gov/ireg). If you prefer to request the Department make these changes please read the instructions carefully as you complete this form. For assistance please call (804) 367-8037. **NOTE:** If there has been a change in ownership and you are the new owner, do not complete this form. You must register at [www.tax.virginia.gov/ireg](http://www.tax.virginia.gov/ireg) or complete and submit the Form R-1.

If requesting the changes via paper; Fax the completed form to (804) 367-2603 or mail to:

Virginia Department of Taxation  
PO Box 1114  
Richmond, VA 23218-1114

**FOR ALL CHANGES** YOUR VIRGINIA ACCOUNT NUMBER IS REQUIRED and, if applicable, your Federal Employer ID Number.

Virginia Account Number \_\_\_\_\_

Federal Employer ID (FEIN) \_\_\_\_\_

**NAME, CONTACT AND/OR ADDRESS CHANGE(S)** - Complete the information in both columns.

**Name Change**

LEGAL BUSINESS NAME	NEW LEGAL BUSINESS NAME
TRADING-AS NAME	NEW TRADING-AS NAME

**Contact Phone Number Change**

CONTACT PHONE NUMBER	NEW CONTACT PHONE NUMBER
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**Change In Physical Business Location** **Effective Date** \_\_\_\_\_

PHYSICAL STREET ADDRESS	NEW PHYSICAL STREET ADDRESS
CITY ST ZIP	CITY ST ZIP

**Change In Mailing Address**

MAILING ADDRESS	NEW MAILING ADDRESS
CITY ST ZIP	CITY ST ZIP

**BUSINESS CLOSED, NO LONGER OPERATING** **Effective Date** \_\_\_\_\_  
(e.g., Completely out of business, Business type structure changed, or Corporation merged)

**NO LONGER LIABLE FOR TAX TYPE(S)** **Effective Date** \_\_\_\_\_  
(e.g., Sales, Withholding, etc.)

\_\_\_\_\_ **Effective Date** \_\_\_\_\_

\_\_\_\_\_ **Effective Date** \_\_\_\_\_

\_\_\_\_\_ **Effective Date** \_\_\_\_\_