



REQUEST FOR CONSENT TO DISSOLUTION

Mail to: NYC Department of Finance, Collection Division, Vendor Tax Clearance Unit, 59 Maiden Lane, 24th Fl., NY, NY 10038

Instructions: Please complete, sign and date where indicated and mail to the address above. Under Section 1004 of the Business Corporation Law, As of October 1, 2009, Tax Clearance must be obtained from the NYC Department of Finance (Finance) when dissolving a corporation. The Dissolution Consent must be attached to the *Certificate of Dissolution* of corporations that have done business in and incurred tax liability to the City of New York. If you are filing a Request for Dissolution on behalf of a corporation, you will need to obtain and submit a signed and dated [Power of Attorney](#) with this request.

Request for Consent of the Commissioner of Finance for the dissolution of:

Corporation Name _____ Taxpayer Identification Number _____

Address: _____
Number and Street

City: _____ State: _____ Zip Code: _____

Telephone Number: (_____) _____ Email Address: _____

State and County of Incorporation: _____ Date of Incorporation: ____/____/____

Date Business Began (in NYC): ____/____/____ Date Business Ended (in NYC): ____/____/____

Print or Type Name of Signer _____ Print or Type Title of Signer _____

Signature _____ Date ____/____/____