

**G-5(B) WITHHOLDING ACCOUNT CHANGE FORM**

GA WITHHOLDING ID

**NEW BUSINESS LOCATION ADDRESS**

[Empty box for New Business Location Address]

**NEW MAILING ADDRESS**

[Empty box for New Mailing Address]

DO NOT WRITE "SAME" IN ABOVE. EACH CHANGE MUST BE WRITTEN IN THE APPROPRIATE AREA.

Business Discontinued  
Date Last Wages Paid \_\_\_\_\_

Business Sold  
Date \_\_\_\_\_  
Sold to \_\_\_\_\_

SIGNATURE

TITLE

DATE

Change in Trade Name  
\_\_\_\_\_

Reason for Change \_\_\_\_\_  
(if incorporated, submit amended charter and articles of incorporation)

No Longer Have Employees  
Date Last Wages Paid \_\_\_\_\_

TELEPHONE NUMBER

**INSTRUCTIONS FOR COMPLETING ACCOUNT CHANGE OR DELETE FORM G-5(B)**

The Account Change or Delete Form must be used to notify the Department of a change in name/address or as notification that you are no longer liable for Georgia Withholding Tax for the reason(s) shown above.

CHANGE OF ADDRESS: Complete appropriate box.

BUSINESS DISCONTINUED: Check box and indicate date business closed.

BUSINESS SOLD: Check box. Indicate date business was sold and name of new owner.

CHANGE IN TRADE NAME: If name change is not due to a structure change, check box and indicate new name. Include a copy of the "Articles of Amendment" from the Secretary of State's office.

STRUCTURE CHANGE: Submit a completed application to obtain a new withholding number. Attach completed G-5(B) to application as notification to cancel old number.

SIGNATURE: Person submitting change must sign the form.

NOTE: If you had a structure change or you purchased a business, do not use forms indicating the old withholding number. Doing so could cause incorrect posting of your payments.