

C-9600  
10-07, R-7

STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF TAXATION

MAILING ADDRESS:  
Bulk Sale Section  
PO Box 245  
Trenton, NJ 08695-0245

OVERNIGHT DELIVERY:  
Bulk Sale Section  
50 Barrack Street  
Trenton, NJ 08695

NOTIFICATION OF SALE, TRANSFER, OR ASSIGNMENT IN BULK

ATTACH COPY OF PENDING CONTRACT OF SALE OR TRANSFER

This form is to be used by the purchaser/transferee to notify the Director of the Division of Taxation, of any bulk transfer in accordance with P.L. 2007, Chapter 100 (A5002). See Reverse Side.

By statute the following information is required to be submitted by registered mail ten (10) days before taking possession of, or paying for, the property. CERTIFIED MAIL OR OVERNIGHT DELIVERY IS ALSO ACCEPTABLE.

Name of Purchaser(s) \_\_\_\_\_

Trade Name of Purchaser(s) \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Federal Identification No. \_\_\_\_\_ Social Security No. \_\_\_\_\_

Name and Address of Attorney  
or Escrow Agent for Purchaser \_\_\_\_\_

Telephone Number (\_\_\_\_\_) \_\_\_\_\_

Sellers N.J. Tax Identification No.

Name of Seller(s) \_\_\_\_\_

Trade Name of Seller(s) \_\_\_\_\_

Seller's Liquor License No. (If Applicable)

Name of Officer, Partner, or Individual Owner \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number (\_\_\_\_\_) \_\_\_\_\_ Business Phone Number (\_\_\_\_\_) \_\_\_\_\_

Federal Identification No. \_\_\_\_\_ Social Security No. \_\_\_\_\_

Name and Address of Attorney  
or Agent for Seller \_\_\_\_\_ Phone Number (\_\_\_\_\_) \_\_\_\_\_

Date Seller Acquired Business: Month \_\_\_\_\_ Year \_\_\_\_\_

SCHEDULED DATE OF SALE _____	Sales Price of Furniture, Fixtures & Equipment . . . . . \$ _____
	Sales Price of Land and Building . . . . . \$ _____
	Sales Price of Other Assets (attach schedule) . . . . . \$ _____
	Total Sales Price . . . . . \$ _____

TERMS AND CONDITIONS OF SALE \_\_\_\_\_

LOCATION OF BUSINESS OR PROPERTY \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_

Signature

Title - If other than purchaser, please identify

Date