

NOTICE OF CHANGE C-36 (12/10)

Complete all items applicable to your organization, trade, business or employment in Vermont.

- Nature of Change: Change of Address/Trade Name > Complete Part A, D & E Ceased Employment > Complete Part B, D & E
 Sale/Lease/Reorganization of Business > Complete Part C, D, & E

A **CHANGE OF ADDRESS/TRADING AS:** Corrections to Name and/or Address of record. **(NO CHANGE IN OWNERSHIP OR BUSINESS TYPE)**

Name: _____ Contact: _____
 Trading As: _____ Telephone: _____
 Address: _____ Fax & Email: _____

B **CEASED EMPLOYMENT**

Date Employment Ended: _____ Final Pay Date: _____

No Longer have Vermont Employees Explain: _____
 Discontinued operations in Vermont Explain: _____
 Out of Business - Reason: Ceased Business / Closed Filed for Bankruptcy Foreclosure

Location of all employment records:
 Address: _____
 Contact: _____ Telephone: _____ Fax: _____
 Email Address: _____

If your business is a Corporation, are your officers receiving any wages or draws after the effective date? Yes No

C **SALE / LEASE / REORGANIZATION OF BUSINESS (PLEASE PROVIDE THE FOLLOWING INFORMATION)**

1. Date of Change _____ 2. Date Final Wages Paid _____

3. Nature of change:
 ALL of Vermont Business Sold PART of Vermont Business Sold
 ALL of Vermont Business Leased PART of Vermont Business Leased
 Reorganization of Business

4. Did you retain title or control of any assets? No Yes - If "Yes" ALL PART (Specify percentages below)

LAND	BUILDINGS	INVENTORY	MACHINERY	VEHICLES	OFFICE EQUIPMENT	FURNITURE & FIXTURES	ACCOUNTS RECEIVABLE	FRANCHISE	OTHER-SPECIFY TYPE & PERCENTAGE ON ATTACHED SHEET.

5. Other Assets retained: _____ Percentage Retained: _____ %

6. Enter the complete name, trading as, address and telephone number of the new owners/operators of the business:
 Legal Business Name _____
 Trading As _____
 Mailing Address _____
 City, State, Zip _____
 Contact: _____ Telephone Number: _____ Email Address: _____

7. Is there any common ownership between the two businesses? Yes No If Yes, attach explanation

SECTION C CONTINUED ON PAGE 2

8. Will the new entity continue to operate this business? Yes No If No, Explain:

9. Will you continue to pay wages after the change to your business occurs? Yes No

If "Yes", please provide reason: _____

10. Will you continue to operate a business under this legal entity? Yes No

If "Yes", please give the name and the nature of the business retained/continued: _____

11. Will you be starting a new business under this legal entity? Yes No

If "Yes", provide the following: Name of Business: _____

Nature of Business: _____ Start Date: _____ Date First Wages to be Paid: _____

12. Will direction and control of the business remain the same? Yes No

Be advised that the seller of a business is required to disclose its experience rating to a potential buyer upon request, in accordance with §1325(b)(1).

FOR LEASED BUSINESS ONLY

13. Did the title to any assets go to the lessee? Yes No If, "Yes", please provide information on the assets:

14. Please describe in detail the nature of the leased business:

15. I understand that as the seller of a business, I am required to disclose the Unemployment Insurance tax experience rating to a potential buyer upon request, in accordance with §1325(b).

I have read and understand the preceding statement.

C

16. Please describe any other changes not specified above: _____

D

I CERTIFY THE ABOVE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Contact Name: _____ Telephone: _____ Ext. _____ Fax: _____

E

Signature: _____ Title: _____ Date: _____