Discovery Questionnaire

Please complete, sign and date this questionnaire if you obtained your business license but do not believe you need to file a Business Property Assessment Return.

<table>
<thead>
<tr>
<th>Business Name:</th>
<th>Contact Person:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mailing Address:</td>
<td>Telephone (with area code):</td>
</tr>
<tr>
<td>(               )</td>
<td>Business Location (indicate street address):</td>
</tr>
</tbody>
</table>

1. ☐ The business property is filed under another active business account. Indicate below the business name and account number under which your business assets are filed.

Business Name: ______________________________________________________________________________________

Municipality of Anchorage Business Property Account Number: _________________________________________________

2. ☐ The business has been sold, closed, or liquidated. Please complete the appropriate section below. **Note**: If the business was sold, closed, or liquidated after January 1st, you will need to file the Business Property Assessment Return for this year.

   ☐ Business Sold:
   
   Date of Sale: ____________________________
   
   Buyer’s Name: _______________________________________________________________________
   
   Address: ___________________________________________________________________________

   Is the new owner operating under the same business name?  Yes ☐ No ☐
   
   New Business Name, if known: ___________________________________________________________________

   ☐ Business Closed:
   
   Date of Closure: ____________________________
   
   Disposition of Assets: _______________________________________________________________________

   ☐ Business Liquidated (business ceased to exist and assets were liquidated)
   
   Date of Liquidation: ____________________________
   
   Disposition of Assets: _______________________________________________________________________

3. ☐ This business owns less than $20,000 in assets. Please give a detailed explanation below or attach additional pages.

_____________________________________________________________________________________________________

_____________________________________________________________________________________________________

_____________________________________________________________________________________________________

I certify under penalty of perjury under the laws of the Municipality of Anchorage and to the best of my knowledge that the above statements are true and correct.

Signature: ___________________________________________  Date: ______________________

(Revised 3/21/2024)