

Employment Development Department, MIC 4 PO Box 826880 Sacramento, CA 94280-0001 Fax applications to 1-916-319-1831 File electronically at <u>e-Services for Business</u> (edd.ca.gov/e-Services for Business) Do not mail with any other form.

Application for Transfer of Reserve Account

If you acquired a business from an employer who was registered with the Employment Development Department, you may apply for a transfer of all or a part of the reserve account. A reserve account is used to determine the Unemployment Insurance tax rate. Not all reserve account balances are desirable. If the transfer of your predecessor's reserve account is approved, you will be subject to all or a percentage of the predecessor's benefit charges, which could increase your rate. Some reserve account transfers are required per section 1061 of the California Unemployment Insurance Code (CUIC). Use this form to report the percent of business and employees that were transferred. **Note:** Any application for transfer filed after 90 days of the business purchase may be restricted per section 1053 of the CUIC.

Instructions - Read this form carefully and answer all questions. Failure to answer all questions may result in a delay or denial of your application. If you need more space to complete your answers, you can attach separate sheets. For more information, call the Taxpayer Assistance Center at 1-888-745-3886.

Se

ctio	n I:
1.	Your eight-digit employer payroll tax account number:

2. Your full name:

- 3. Your business name:
- 4. Business address:
- 5. Name of business acquired:
- 6. Previous owner's eight-digit employer payroll tax account number:
- 7. Previous owner's full name:
- 8. Previous owner's business location:

8a. Previous owner's phone number: (

- 9. Date of acquisition:
- 10. Type of acquisition (Check one)

Purchase. Agreed upon purchase price: \$

Stock purchase.

Change in form only. If you checked this box, call the Taxpayer Assistance Center at 1-888-745-3886 before submitting the application to determine if you were required to obtain a new employer payroll tax account number. For example, a new employer payroll tax account number is not required if there was just a name change, change from sole proprietor to corporation or partnership, partner added or deleted, new federal employer identification number obtained, but same owner, LLC added, etc.

Other. Explain:

11. Major assets acquired (Check all that apply.)

Place of business Trade name Customers Accounts receivable Goodwill Stock in trade

Tools and fixtures **Employees**

12. Did you continue the operation of the business you acquired? Yes No

If No, explain:

14.	Number of workers employed by previous owner just before sale:								
15.	5. Number of previous owner's workers now employed by you:								
16.	16. Are you a labor contractor, employment agency, or other provider of employment services? Yes No If Yes, explain operation:								
17.	Did you pur	chase an employm	ent agency?	Yes No	If Yes, explain o	peration:			
18.	Portion of the	ne business acquire	ed from the pre	vious owner	:				
	eserve accourtax account at								
	(b) Part	of the business.	If you checked	this section,	complete Section	n II and Sectior	ı III.		
Cooti	ian III								
	ion II:	of the business as	auired was star	rtad by ita pr			/NANA/DD	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
1. 2.	-	of the business ac		-	previous owner's		(MM/DD	/	
3.	•		•		•		ne quarter	of acquisition	
O.	If possible, provide the taxable wages for the portion of the business you acquired up to the quarter of acquisition. Use only wages up to the \$7,000 annual limit for each employee for calendar years listed below. The taxable wages, for the portion of the previous owner's business acquired, were:								
	For calend	ar year: 2020 \$		202	21 \$	2022	\$		
	- By Quarters -								
	Jan.	1 to Mar. 31	Apr. 1 to Jur	-	Jul. 1 to Sep	ot. 30	Oct. 1 to	Dec. 31	
	2023 \$		\$		\$		\$		
	2024 \$		\$		\$		\$		
		cannot provide ex ner for the taxable			e. To get the mos	et accurate estir	mate, conta	act the	
	Did you esti	mate these figures	? Yes N	0					
	Did the prev	vious owner approv	e these figures	? Yes	No				
Section	on III:								
	List the con	tact person's name	and phone nu	mber:					
	List the con Print Name	•	e and phone nu	mber:		Phone: ()		
	Print Name gn and date: ormation is c	•	this application	n for transfe		unt and declare	ŕ	oove	
	Print Name gn and date: formation is c Signature:	: I/we hereby submit orrect to the best o	this application	n for transfel e and belief.		unt and declare Date:	that the a	oove	
	Print Name gn and date: ormation is c Signature: (0	: I/we hereby submit orrect to the best o Owner, Corporate C	this application	n for transfel e and belief.		unt and declare Date: Ithorized Agent	that the al	oove	
	Print Name gn and date: formation is c Signature: (0 Print Name	: I/we hereby submit orrect to the best o Owner, Corporate C	this application	n for transfel e and belief.		unt and declare Date:	that the al	oove	
	Print Name gn and date: ormation is c Signature: (0	: I/we hereby submit orrect to the best o Owner, Corporate C	this application	n for transfel e and belief.		unt and declare Date: Ithorized Agent	that the al	oove	
	Print Name gn and date: formation is c Signature: (0 Print Name	: I/we hereby submit orrect to the best o Owner, Corporate C	this application	n for transfel e and belief.		unt and declare Date: Ithorized Agent	that the al	oove	

13. Is there common ownership, management, or control of the business at the time of transfer?

Yes No