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Assessor/Collector  
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MICHAEL D. POLLOCK, AAS  
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PO Box 82  
Winston-Salem, NC 27102

## FORSYTH COUNTY TAX ADMINISTRATION EXTENSION REQUEST

**Please complete the following:**

BUSINESS NAME: \_\_\_\_\_

ABSTRACT NUMBER: \_\_\_\_\_

(Abstract number appears on your business personal property listing form in the upper left-hand corner)

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHYSICAL BUSINESS ADDRESS CONFIRMED IN FORSYTH COUNTY:

\_\_\_\_\_

\_\_\_\_\_

**If this request is for more than one account, please attach a list of the business names, addresses and account number for each account for which an extension is requested.**

Reason for requesting the extension: \_\_\_\_\_

\_\_\_\_\_

North Carolina General Statute 105-307 states that an extension may be granted "for good cause shown". Extensions cannot be granted beyond April 15.

EXTENSION DATE REQUESTED: \_\_\_\_\_

This form must be completed and submitted within the regular listing period in order for the filing date to be extended.

EXTENSION REQUESTED BY: \_\_\_\_\_

TITLE: \_\_\_\_\_

DATE: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_