



STATE OF CONNECTICUT
DEPARTMENT OF REVENUE SERVICES
Tax Permit



mL603

Rev. 08/21

CT Tax Registration No.: 046311866-001
Letter ID: L0009512393
Date Issued: February 28, 2025

UNIVERSITY OF CONNECTICUT
ATTN TAX DEPT
343 MANSFIELD RD UNIT U-1074
STORRS MANSFIELD CT 06269-2074



mL603

Dear Taxpayer,

Attached is your Sales & Use tax permit. Please display it conspicuously for your customers to see. Any permit previously issued by the Connecticut Department of Revenue Services (DRS) for the specific location noted on this permit is now void and should be destroyed.

Any change in ownership or form of organization requires a new permit. If your business is sold, transferred, or discontinued, return this permit at once to:

Department of Revenue Services
450 Columbus Blvd.
Suite 1
Hartford, CT 06103

Enter the last day of business and the name of the successor, if applicable, on the back of the permit. Sign the permit as indicated.

Business and individual taxpayers can use **myconneCT** to file a variety of tax returns, update account information, and make payments online.

This Tax Permit is valid for two years.

You may not assign or transfer this permit. Display this permit conspicuously for your customers to see.

Department of Revenue Services
State of Connecticut
450 Columbus Blvd.
Suite 1
Hartford, CT 06103

**Sales & Use
Tax Permit**



The person named below is licensed under the Sales & Use Tax Act.
This permit is good **only** for the named permittee and at the location shown.
If there is any change in ownership, the permit is null and void.

Use only at this location:
UNIVERSITY OF CONNECTICUT
ATTN TAX DEPT
343 MANSFIELD RD UNIT U-1074
STORRS MANSFIELD CT 06269-2074

Date Issued	Expiration Date	Business Start Date	Connecticut Tax Registration Number
02/28/2025	04/30/2027		046311866-001

UNIVERSITY OF CONNECTICUT
ATTN TAX DEPT
343 MANSFIELD RD UNIT U-1074
STORRS MANSFIELD CT 06269-2074

Mark D. Boughton
Commissioner of Revenue Services

This license may not be transferred or assigned.

Important

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Last day of business:

Name of successor:

Authorized signature: