STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 942840
SACRAMENTO CA 94240

Notice Date

APPLICATION FOR CERTIFICATE OF REVIVOR

Before the California Franchise Tax Board

In the matter of the application for certificate of revivor of:

Entity Number :

FEIN/SOS Number :

Entity Name :

Address :

I request relief from suspension or forfeiture for this entity. I previously submitted or I am enclosing all required payments, returns, or documents.

Print Name _____ Title _____

Signature _____ Date _____

Daytime Phone Number _____

Those who can sign this application on behalf of an entity (domestic or foreign) include:

- Any stockholder, creditor, member, general partner, or officer.
- Any person having an interest in relief from suspension or forfeiture.

Domestic entities can also have a majority of the surviving trustees or directors sign on their behalf.