

CLOSE-OUT SALE INFORMATION SHEET

REQUIREMENTS

- Close-Out Sale Application (Attached)
- Proof of Identity (i.e. State issued Driver's License/I.D. Card, Military I.D., Passport)
- Full Inventory List
- Check or Money Order for \$0.0030 of Inventory made payable to City Treasurer - License Section

PRICING

- Application fee - \$20.00
- Close-Out Sale License fee - \$0.0030 of Inventory

OFFICE LOCATION & HOURS

4252 Groves Road
Columbus, OH 43232

Monday - Friday
8:00 a.m. to 3:30 p.m.

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OFFICE USE ONLY

License # _____

Issue Date _____

Expiration Date _____

DEPARTMENT OF PUBLIC SAFETY
LICENSE SECTION**CLOSE-OUT SALE
APPLICATION**DEPARTMENT OF
PUBLIC SAFETY***This application must be completed by the owner, stockholder, or partner of that which is to be licensed.*****APPLICANT INFORMATION**

Name:

Date of Birth:

Residential Address:

City:

State:

Zip:

Phone:

Email:

BUSINESS SALE INFORMATION

Sale Start Date:

Sale End Date:

Sale Hours of Operation:

Business Name:

Business Address:

City:

State:

Zip:

If owner is corporation, firm or partnership please answer the following:

Name:

Business Address:

City:

State:

Zip:

Please list all persons who have a direct or indirect interest in the business, and corporate officers that hold >10% of stock offered by said corporation. (Attach additional sheets if necessary)

1. Name:

Title:

Date of Birth:

Address:

City:

State:

Zip:

1. Name:

Title:

Date of Birth:

Address:

City:

State:

Zip:

Do you understand that a violation of Chapter 535 (governing Discontinuing Business Sales) may cause suspension fo all licenses issued there under?

Yes No

Does that which is to be licensed confirmed to the City Codes, including, but not limited to, Building, Health, Fire, and State of Ohio and Federal laws applicable thereto?

Yes No

Has or is any criminal, immoral, or disorderly conduct, as defined in Columbus City Code Title 23 and Ohio Revised Code Title 29, taking place on the premises where that which is to be licensed exists by either the person having a direct or indirect interest therein or the patrons thereof?

Yes No

Has any licensed issued to you or your company by the City of Columbus ever been revoked, refused, or suspended within the past three (3) years?

Yes No

Per regulations set in Columbus City Code 501.05(E), the License Section has the power to make rules regarding the "qualifications of the applicants and the conditions precedent the applicants must meet prior to the acquisition of licenses." Following this direction, all applicants must be able to read, speak, and comprehend the English language in order to obtain a valid license. By initialing on the line below, you agree that you are able to fulfill this requirement.

_____ Initials

All information contained in this application is subject to disclosure as a matter of public record. Any false statement made or given in this application shall result in denial, revocation, or future revocation of the license under Columbus City Code Chapters 501 and 540, and may be referred for criminal prosecution under Ohio Revised Code Chapter 2921.13 (A-3).

State of Ohio, County of Franklin

I, _____, being duly sworn, affirm and swear that I am the
(Print Applicant's Name)

individual making the foregoing application; that he or she is knowledgeable with respect to that which is to be licensed and to the information contained in the application; that the answers, statements, and allegations made in this application are true and accurate to the best of my knowledge and belief; and that I am an owner/operator/applicant of that which is to be licensed by this application.

(Applicant's Signature)

Sworn to before me and subscribed in my presence this ____ day of _____, 20____.

Notary or Agent of Director of Public Safety

The application must be signed, dated and notarized.