

GOING OUT OF BUSINESS INFORMATION SHEET

REQUIREMENTS

The following documentation and attachments are required in addition to and will not be accepted in lieu of a completed application.

- Completed and Notarized Going Out Of Business Application (Attached)
- Full Inventory List
- Check or money order for \$0.0030 made payable to City Treasurer – License Section

PRICING

- Application Fee – \$10.00
- Going Out of Business License Fee – \$0.0030 of Inventory

OFFICE USE ONLY

License # _____

Issue Date _____

Expiration Date _____

DEPARTMENT OF PUBLIC SAFETY
LICENSE SECTION**DISCONTINUING BUSINESS
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:

Residential Address:

City:

State:

Zip:

Phone:

Date of Birth:

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Has any licensed issued to you or your company by the City of Columbus ever been revoked, refused, or suspended within the past three (3) years?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 OR FUTURE REVOCATION OF THIS LICENSE, AS WELL AS CRIMINAL PROSECUTION UNDER CHAPTER 2321.13(A-3), (A-5) AND COLUMBUS CITY CODE 589.

State of Ohio, County of Franklin

_____, being duly sworn, deposes and says he or she is the
(Print Applicant's Name)

individual making the foregoing application; that he or she is knowledgeable with respect to that which is to be license; and that the answers to the foregoing questions and other statements contained herein are true of his or her own knowledge and belief.

(Applicant's Signature)

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

Notary or Agent of Director of Public Safety

Must be SIGNED, DATED, and NOTARIZED.