Business Services

Office location - 7447 E. Indian School Road, #110

Scottsdale, AZ 85251

Telephone - (480) 312-2400

ww Scottsdale A7 gov/licenses



Office Use Only					
	License No	No			
	Original	\$25.00			
	Renewal	\$10.00			

	vveb - www.ScottsdaleAz.gov/ilcenses	PIZON ®		□ Originai \$25.00				
	CL	OSE OUT SALES L	ICENSE	Renewal \$10.00				
Close Out Sales License Ord. (date & initial)								
	All applications for a license must be made at least 30 days and not more than 60 days prior to date sale is to commence.							
1.	. BUSINESS NAME		2. BUSINE	ESS PHONE				
3.	B. BUSINESS LOCATION		DATE S 4. COMMI	ALE TO ENCE				
5.	6. BUSINESS MAILING ADDRESS							
6.	6. TYPE OF OWNERSHIP: Individua	al Partnership Co	orporation					
	NAME	ADDRES	S	HOME/MOBILE				
7.	. TYPE OF OCCUPANCY: Ownership Lease Sublease							
	Name and address of landlord if different fro	m owner						
	Date of ownership, lease or sublease termination							
8.	. Have you contracted with any person or firm to aid in the sale?							
	Name		Phone					
	Address							
9.	DISPOSITION OF BUSINESS:							
	Business to terminate permanently Business to be continued at another location							
		Business Name		Date to Commence				
Address								
АТТ	ATTACH: STATEMENT OF REASON FOR TERMIN COPY OF LEASE AGREEMENT DETAILED INVENTORY LIST OF ALL ITI			CELLABLE CONTRACTS RTISING STATING MEANS OR SED				

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

_____ Signature of Applicant ___