



<b>For office use only:</b>
Licensing Year: _____
License No.: _____
Date Issued: _____

## APPLICATION FOR GOING OUT OF BUSINESS SALE LICENSE

Name of Business \_\_\_\_\_

Business Address \_\_\_\_\_

Location of sale, if different \_\_\_\_\_

Manner of conducting sale (auction, etc.) \_\_\_\_\_

If auction, name of auctioneer \_\_\_\_\_

Beginning and ending dates of sale (90 days maximum) \_\_\_\_\_

**The following must be with this application:**

1. Complete inventory of merchandise offered in this sale .
2. Application fee of \$75.00.

**I understand that no merchandise can be sold except that listed in the inventory and that additional merchandise cannot be added to the inventory and be sold at this sale.**

I agree to comply with all requirements of the Salina Code and regulations relating to the operation of such business.

I agree my license may be revoked or suspended if I am found to have violated such requirements or regulations or if I have misrepresented any facts in this application.

I do solemnly swear that I have read the contents of this application, and that all of the information given here is full, true, and known to the affiant to be so.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Title \_\_\_\_\_

\*\*\*\*\*

\$75.00 Paid	Date _____	Receipt No. _____	Received by _____
--------------	------------	-------------------	-------------------

Carbon Copy Application to: City Neighborhood Services Department

\*\*\*\*\*

Approved/Disapproved

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ City Clerk

\*\*\*\*\*