

**LICENSE TO CONDUCT REMOVAL,  
CLOSE-OUT, FIRE, LIQUIDATION SALE  
Act 39, Acts of 1961**

**For Administrative Use:**

Approval:

Treasurer \_\_\_\_\_ Date \_\_\_\_\_ Water \_\_\_\_\_ Date \_\_\_\_\_

An Act to regulate insurance, bankruptcy, mortgage, insolvent, assignee's, executor's administrator's receiver's trustee's, removal and closing out sales, and sales of goods, wares and merchandise damaged by fire, smoke, water or otherwise; to provide penalties for the violation hereof and to repeal certain acts and parts of acts.

NAME OF BUSINESS \_\_\_\_\_

LOCATION OF BUSINESS \_\_\_\_\_

ADDRESS OF APPLICANT \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

DATE OF SALE \_\_\_\_\_ LENGTH OF SALE \_\_\_\_\_

Is the applicant the owner of the goods to be sold? \_\_\_\_\_

If applicant is a partnership, corporation, firm or association, the name and the position of the individual filing such application. \_\_\_\_\_

How long has applicant been in business at this location? \_\_\_\_\_

Person in charge of and responsible for the conduct of the sale:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_

Type of Sale (check one):

Closing out Sale – Applicant to state that the business will be discontinued at the termination of the sale.

Removal Sale – Applicant to state that the business will be discontinued at the termination of the sale and location of premises to which the business is to be moved.

Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fire, Smoke, Water or otherwise sale, goods damaged – Applicant to state time, location and cause of damage.

Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Has applicant ever received a license to conduct removal, closing out, fire or liquidation sale before?

Yes \_\_\_\_\_ No \_\_\_\_\_

If so, when? \_\_\_\_\_ Where? \_\_\_\_\_

Applicant further represents that attached hereto is a statement declaring the full value of goods in the store inventory to be sold. \*

TOTAL INVENTORY VALUE \_\_\_\_\_

\* No goods will be added to the inventory after the application is made or during the sale and that the inventory contains no goods received on consignment.

\_\_\_\_\_  
DATE OF APPLICATION

\_\_\_\_\_  
SIGNATURE OF APPLICANT

Subscribed and sworn before me on this the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public, County of \_\_\_\_\_, State of \_\_\_\_\_

\_\_\_\_\_  
Commission Expires

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**For Administrative Use:**

Issued to \_\_\_\_\_ Address \_\_\_\_\_

License Fee Paid \$150.00 Date \_\_\_\_\_ License Number \_\_\_\_\_

Renewal Fee Paid \$ 75.00 Date \_\_\_\_\_ 1<sup>st</sup> Renewal \_\_\_\_\_

Renewal Fee Paid \$ 75.00 Date \_\_\_\_\_ 2<sup>nd</sup> Renewal \_\_\_\_\_