

City of Rochester

Going Out of Business

For Office Use Only

Lic.# _____	Date _____
Contact _____	
Phone _____	
Operation Days _____	

License Application – Article 29-F, General Business Law

Type of Sale (circle one) – “Closing Out”, “Defunct Business”, “Goods Damaged by Fire, Smoke or Water”

1. a. Name and address of applicant: \_\_\_\_\_

b. True owner of goods? Yes \_\_\_\_\_ No \_\_\_\_\_

c. If a partnership, names and address of all partners:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

d. If a corporation or association: Date and place of incorporation \_\_\_\_\_

Address of principal office in N.Y. \_\_\_\_\_

Name and addresses of all officers:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has controlling interest of corporation been transferred within six (6) months? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Names and addresses of persons in charge of sale:

\_\_\_\_\_

\_\_\_\_\_

3. Exact location of proposed sale: \_\_\_\_\_

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

4. Date proposed sale is to begin: \_\_\_\_\_

5. Nature of occupancy? Own \_\_\_\_\_ Rent \_\_\_\_\_

Other (specify)? \_\_\_\_\_

Effective termination date of such occupancy \_\_\_\_\_

6. Reason for urgent disposal of merchandise: \_\_\_\_\_

\_\_\_\_\_

7. Statement of descriptive name of sale: \_\_\_\_\_  
 \_\_\_\_\_
8. If "closing out sale" or "defunct business sale", complete the following:
- a. Is business to be terminated permanently? Yes \_\_\_\_\_ No \_\_\_\_\_
  - b. Is business to be reopened at another location: Yes \_\_\_\_\_ No \_\_\_\_\_
  - c. Location of reopening: \_\_\_\_\_
  - d. Does applicant intend to resume operation of business after termination? Yes \_\_\_\_\_ No \_\_\_\_\_
  - e. Name under which business will be reopened: \_\_\_\_\_
9. If application is for a "sale of goods damaged by fire, smoke or water" or "defunct business sale", and applicant was not true owner of the merchandise at the time when the events leading to the proposed sale occurred, then applicant must attach bill of sale, other documents of transfer, and official appraisal if application is for a "defunct business sale".
10. Attach full, complete, itemized inventory including separate listing of goods purchased within past ninety (90) days and total retail value.
11. Furthermore, the above applicant states that no merchandise will be added to the inventory after the date of this application, that all goods, wares and merchandise included in the attached inventory have been purchased by the applicant for resale on orders without cancellation privileges; that the attached inventory comprises no goods, wares and merchandise purchased on consignment; and that none of the merchandise in the attached inventory has been the subject of a licensed sale within one (1) year of the date of this application unless the merchandise was damaged by fire, smoke or water while in the possession of the applicant.

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STATE OF NEW YORK )  
 COUNTY OF MONROE ) SS.  
 CITY OF ROCHESTER )

\_\_\_\_\_ being duly sworn, states the he/she is \_\_\_\_\_  
 \_\_\_\_\_ the applicant herein, that he/she has read  
 the foregoing and knows the contents thereof and that the same is true of his/her knowledge.

\_\_\_\_\_  
 \_\_\_\_\_

Sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

