

Town of Amherst Application for
Going Out Of Business Sale

Business Name _____ Date _____

Address _____ Phone _____

_____ Fax _____

Number of years in business at this location _____

Individual in charge of sale _____ Phone _____

Address _____

Location of sale _____

Beginning date of sale _____ Ending date of sale _____

Name of sale _____

Will business be terminated? _____

If no, at what other location will business be conducted?

ATTACH THE FOLLOWING TO THIS APPLICATION:

1. Complete inventory
2. A statement that no goods will be added to the inventory of this application as filed
3. A statement that no goods are on consignment
4. A statement that no goods listed in the inventory were the subject of a licensed sale conducted neither one year prior to the date of this application
5. \$500.00 filing fee (one check for \$425.00 and one check for \$75.00) made payable to the Town of Amherst. This is valid for 30 days.
6. \$50.00 if required for an additional 30 days

Signed _____

Address _____

Date _____