

Close Out Sale Application

Attach a detailed inventory list.

_____, being first duly sworn on oath, deposes and says that he/she
Name
is the agent for: _____ located at
Business Name
_____, State Seller's Permit # _____.
Address

Said agent is authorized to make application on behalf of said applicant for a license to conduct a Close Out Sale pursuant to Section 9.16 of the Madison General Ordinances for a period of time beginning _____ and ending _____ (not to exceed 60 successive days).
date date

Affiant further says that the information set forth in the inventory attached to this application and made part thereof is true and correct to affiant's knowledge. Affiant further says that the name and addresses of the principals such as partners, officers, directors and stockholders of said application are as follows:

Name	Address	Office

Signature of Owner or Applicant

Date

Subscribed and sworn to before me this
_____ day of _____, 20_____

Notary Public, Dane County, State of Wisconsin
My Commission Expires _____

611 License # _____