

# 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  
date date  
days). 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 \_\_\_\_\_