

CITY OF GALENA, ILLINOIS



'Going Out of Business Sale' License Application

Please Note: The license lasts for a maximum of 60 days with a possibility of a 30 day renewal.

License Fee: \$50.00

The undersigned hereby makes application for a 'Going Out of Business Sale' license for a period commencing _____ and ending _____ indicated hereafter.

Business Name: _____

Address: _____

Phone #: _____

Please Note: If the applicant is a partnership, corporation, firm, or association; list the name and address of the individual filing the application.

Name of Applicant (must be owner of goods to be sold): _____

Address of Applicant: _____
City State Zip

Style in which the sale will be conducted: _____

Address where the sale will be conducted: _____

Sale start date: _____ **Sale end date:** _____

Name of person in charge of conducting the sale: _____

Address of person in charge of conducting the sale: _____
City State Zip

- Please include a full explanation with regard to the condition or necessity which is the occasion for such sale, including a statement of the descriptive name of the sale and the reasons why such name is truthfully descriptive of the sale. If the application is for a license to conduct a going out of business sale, it shall also contain a statement that the business will be discontinued at the premises where the sale is to be conducted upon termination of the sale. If the application is for a license to conduct a removal sale, it shall also contain a statement that the business will be discontinued at the premises where the sale is to be conducted upon termination of the sale, in addition to the location of the premises to which the business is to be moved. If the application is for a license to conduct a sale of goods damaged by fire, smoke, water or otherwise, it shall also contain a statement as to the time, location and cause of such damage.

- Attach a full, detailed and complete inventory of the goods that are to be sold, which inventory shall:
 - Itemize the goods to be sold and contain sufficient information concerning each item, including make and brand name, if any, to clearly identify it;
 - List separately any goods which were purchased during a 60 day period immediately prior to the date of making application for the license; and
 - Show the cost price of each item in the inventory together with the name and address of the seller of the item to the applicant, the date of the purchase, the date of the delivery of each item to the applicant and the total value of the inventory at cost.

Statements:

I, the undersigned, hereby state that 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.

I, the undersigned, hereby state that I have in the past maintained a place of business within the jurisdiction of the City of Galena where the goods so listed in his inventory have been sold or offered for sale for not less than four (4) months prior to the time of making application for this license. This subparagraph shall not apply to any applicant who acquired a right, title or interest in the goods as: 1) an heir, legatee or surviving joint tenant, or 2) an executor, administrator, trustee, or guardian, or 3) pursuant to an order or process of a court of competent jurisdiction.

I, the undersigned, agree to post a copy of the application, inventory and license in a conspicuous place in the sales room or place where the inventoried goods are to be sold, so that the public may be informed of the facts relating to the goods before purchasing same; provided, however, that such copy need not show the purchase price of the goods. The duplicate copy of a license issued shall be attached to the front door of the premises where the sales is conducted in such a manner that it be clearly visible from the street. Any advertisement or announcement published in connection with the sale shall conspicuously show on its face the number of the license and the dates of its expiration.

The undersigned, being duly sworn, hereby states that the information contained in this application is true to the best of his/her knowledge and that all statements set forth are of his/her own free will.

Please Note: Warning to the applicant. This application must be fully and accurately completed. False or misleading statements may subject applicant to the penalties of perjury in addition to other penalties provided by law.

Return Application to:

City Clerk
City of Galena
101 Green St.
Galena, IL 61036

Applicant's Signature **Date**

Notary's Signature **Date** **Commission Expiration**