

City of Cordele
501 N. 7th Street
P. O. Box 569
Cordele GA 31010

**Business Closed Or Sold Form
Or No Longer Doing Business In The City Of Cordele**

Completion and submission of this form will close the business account with the **City of Cordele**. If you choose to open any type of business in the future, a **New** Occupational Tax Certificate will be required.

****If your business will no longer operate after December 31, 2017 and will not be renewing for the year 2018 please complete this form and return to the Tax and License Department for processing.**

Account # _____

Name of Business: _____

Location of Business: _____

Business Owner: _____

Contact Number: _____ Last Date of Operation: _____

***If your Business was sold, please provide the information of the New Owner Ownership:**

Name of New Owner: _____

Contact Number: _____

By my signature affixed hereto, I do solemnly affirm that the information submitted in this form is true and complete.

Signature of Business Owner: _____ Date: _____

FOR OFFICE USE ONLY:

Tax & License Representative: _____ Date: _____