



**DISTRESS MERCHANDISE LICENSE APPLICATION**

**Dates Sale is to be conducted** From: \_\_\_\_\_ To: \_\_\_\_\_

**Name or Trade Name** \_\_\_\_\_

**Business Address** \_\_\_\_\_  
Street City State Zip Code

**Phone Number** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Business premises are** ( ) Owned ( ) Rented

**Occupancy is to be terminated:** \_\_\_\_\_, 20 \_\_\_\_\_

**Indicate whether merchandise owned by a** ( ) Corporation ( ) Partnership ( ) Individual  
If a corporation, give names and addresses of president, vice-presidents, secretary and treasurer. If a partnership, give names and addresses of partners. If owned by an individual, give name and home address of individual.

Name \_\_\_\_\_ Address \_\_\_\_\_

Principal Business Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Principal Business Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Principal Business Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**Location of accounting records** \_\_\_\_\_

**Reasons for Sale** \_\_\_\_\_  
\_\_\_\_\_

**Methods of Advertising to be used:** ( ) Newspaper ( ) Radio - TV ( ) Direct Mail ( ) other \_\_\_\_\_  
(specify)

**Date advertising will commence** \_\_\_\_\_ Note: Copies of all newspaper, direct mail advertising should be submitted with application.

Neither the undersigned nor any other person listed above has been arrested for or convicted of any felony or misdemeanor except as follows: (List any arrest or conviction, except for traffic violations.)

Date \_\_\_\_\_ Charge \_\_\_\_\_ Location (City & State) \_\_\_\_\_

Date \_\_\_\_\_ Charge \_\_\_\_\_ Location (City & State) \_\_\_\_\_

Date \_\_\_\_\_ Charge \_\_\_\_\_ Location (City & State) \_\_\_\_\_

The undersigned further attests that ( ) he ( ) she ( ) they have read the ordinance governing the liquidation sale which is attached and made a part of this application, and that the inventory submitted herewith is a true and correct inventory of the merchandise to be offered for sale and is in accordance with all the regulations governing such sale.

\_\_\_\_\_ being duly sworn says that the statements contained in the foregoing application are true.

Print Name

**SIGN** \_\_\_\_\_  
President, Partner, Sole Owner

Sworn to me and signed in my presence this \_\_\_\_\_ day \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

**ANY FALSE STATEMENT MADE IN THIS APPLICATION SUBJECTS THE SIGNED TO PROSECUTION FOR PERJURY AND WILL RESULT IN THE REVOCATION OF ANY LICENSE GRANTED PURSUANT HERETO.**

PLEASE INCLUDE SELF ADDRESSED STAMPED ENVELOPE, CHECK OR MONEY ORDER MADE PAYABLE TO  
THE  
CITY OF CINCINNATI  
Department of Finance, Treasury Division  
801 Plum St, Suite 202  
Cincinnati, OH 45202

TREASURY USE ONLY

Fee \$ \_\_\_\_\_ Affidavit Received: \_\_\_\_\_

Inventory Listing Received: \_\_\_\_\_ Bond Received: \_\_\_\_\_