

CITY OF PERRY, GEORGIA

Post Office Box 2030 - 1211 Washington Street – Perry, GA 31069

Office 478-988-2740 Fax 478-988-2748

liz.nelson@perry-ga.gov

BUSINESS CLOSURE NOTIFICATION FORM

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

***If the business will no longer operate for the New Year 2019, complete the bottom portion of this form and return to the Tax and License Division for processing.**

Name of Business: _____

Address of Business: _____
City State Zip Code

Business Owner: _____

Contact Number: _____ Last date of operation: _____

***If the business moved location to another city/county, please provide the name of the city/county:**

Name of City/County: _____

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 and License Representative: _____ Date: _____