



City of GRAND HAVEN, MICHIGAN

APPLICATION FOR GOING OUT OF BUSINESS SALE

Going Out of Business, Insurance, Bankruptcy, Mortgage, Insolvent, Assignee's, Executor's, Administrator's, Receiver's, Trustee's, Removal, Closing Out, and sales of goods, wares and merchandise damaged by fire, smoke, water or otherwise. Each is issued for 30 days only. Fee for each 30 day period \$50. No extensions permitted after second renewal.

Please return application to: City of Grand Haven Clerk's Office
519 Washington Avenue
Grand Haven, MI 49417
www.grandhaven.org
Phone: 616-847-4886
Fax: 616-842-0648

Fee: \$50

Date: _____

9 Original 9 1st Renewal 9 2nd Renewal

Name of Business: _____

Address: _____

9 Individual 9 Partnership 9 Corporation 9 Firm 9 Association

Length of time applicant has been in business at this location: _____ years _____ months

Person filing application: _____ Title: _____

Owner of goods to be sold: _____

Sale will be conducted in the following manner: _____

Sale will be conducted at: _____

Sale will be started _____, 20____ and continue until _____, 20____

Name of person who will be in charge of and responsible for the conduct of the sale:
_____ Phone _____

Reason for sale _____

Type of Sales: 9 Closing Out 9 Liquidation 9 Lost Our Lease 9 Forced to Vacate

9 Going Out of Business 9 Other; describe: _____

9 Inventory of good to be sold attached to this application.

Total value of Inventory at cost: \$ _____

No goods will be added to the inventory after this application is filed or after the sale is started. None of the goods on the inventory attached hereto was received on consignment. A copy of the inventory submitted with this application must be posted on the premises on which the sale is to be conducted. This inventory need not show the cost prices.

Clerk's Use Only
Application Received _____ (Date)
Approved _____ (Date)
Denied _____ (Date)
Application Fee Received _____ (Date)
Inventory of Goods _____ (Date)

