

NOTIFICATION OF BUSINESS CLOSURE OR RELOCATION

TODAY'S DATE:	MOVE or CLOSURE DATE:		
BUSINESS NAME:			
BUSINESS ADDRESS:			
The business noted above has CLOSED	or RELOCATED		
NEW LOCATION ADDRESS IS:			
Inside City			
	(physical address)		
Mailing Address (if different)			
Outside City			

By signing below you are providing notification to the City of Fruitland Park that your business has closed or relocated as of the date indicated. You further acknowledge any business conducted after October 1 of a given year is liable for any/all applicable fees due on business tax receipt or fire inspection during all or apportion thereof the period between Oct.1 of the current year & Sept 30 of the following year. If business has relocated within the City limits of Fruitland Park a transfer fee is applicable.

(Ex. Business closure date, Oct.31, 2016. Business tax period: Oct.1, 2016 thru Sept. 30, 2017. License fee is still applicable.)

 (SIGNATURE)	(DESIGNATION: Owner / Director / Authorized Represen	ntative)
CITY USE ONLY		
FY BILL # AM?	T TRANSFER FEE	
INACTIVATE WRITE-OFF REQ'D	POSTED TRANSFER FEE REQ'D	
CITY REPRESENTATIVE:	_MGR APPROVAL:	