

We Are Columbia

Business Licensing Division

1339 Main St. Columbia, SC, 29201 Phone: (803)545-3345

Close of Business Form

ALL INFORMATION, INCLUDING APPROPRIATE DATES, MUST BE PROVIDED TO PROPERLY CLOSE YOUR ACCOUNT.

Business Information

1.	Business Name:			
2.	Federal ID or SSN:			
3.	Close of Business Date:			
4.	Business Address:			
5.	Business Email:			
Type of Closing (Please select the most appropriate answer that applies) Moved out – No longer operating in the city limits of Columbia Closed permanently – no longer doing business. If Business has been sold, complete section below:				
New Owner's Name:		Phone Number:		
New Owner's Email:				
New Owner's mailing address:				
City	County	State	_ Zip Code	
Submitted By:		Title: _	Title:	
Date Submitted:				
Phone & Email:				

GENERAL INSTRUCTIONS

- Failure to pay all appropriate fees through the closing date may result in issuance of balance due notices by the Business License Division.
- Make sure that all applicable sections of the form are accurately completed.
- Line 4 should reflect the actual physical address of the business. Do not use a
 post office box.