



Business License Division  
1339 Main Street (1<sup>st</sup> Floor) Columbia, SC 29201 • Phone: 803-545-3345  
P.O. Box 147 Columbia, SC 29217

## 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:** \_\_\_\_\_

**Date Submitted:** \_\_\_\_\_

**Phone & Email:** \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_