

**City of Troy  
City Clerk's Office  
500 West Big Beaver  
Troy, Michigan 48084  
(248) 524-3331**



## **INSTRUCTIONS FOR GOING OUT OF BUSINESS SALE APPLICATION**

***CITY CLERK'S OFFICE WILL NOT ACCEPT INCOMPLETE APPLICATIONS***

### **STEP I. APPLICANT:**

- Submit the **completed** and **notarized** Application for Going Out of Business Sale License (**TYPED OR PRINTED**) to the City Clerk's Office with the following:
  - Inventory of merchandise on CD
  - Check payable to City of Troy

### **STEP II. APPLICANT/CITY CLERK'S OFFICE:**

- Review accuracy of completed application
- Process application fee; give receipt to applicant
- Print second copy of receipt; paperclip to application
- Inform applicant that processing time is approximately 3 weeks

### **STEP III. CITY CLERK'S OFFICE:**

- Route application packet electronically for approval/denial
- Print license; mail to contact listed on application

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**APPLICATION FOR GOING OUT OF BUSINESS SALE LICENSE**

Application for License to Conduct Sale in Accordance with Terms of Public Act 39 of 1961 – State of Michigan

**FEE: \$50.00 PER 30-DAY PERIOD**

Date \_\_\_\_\_

MAKE CHECK PAYABLE TO CITY OF TROY

Original 30-Days  First 30-Day Renewal  Second 30-Day Renewal

Name of Business \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Individual  Partnership  Corporation  Firm  Association

Person Filing Application \_\_\_\_\_

Title

Owner of Goods to be Sold \_\_\_\_\_

Address of Sale Location \_\_\_\_\_

Sale will be advertised in the following manner \_\_\_\_\_

Person In Charge Of and Responsible For This Sale – Please Complete the Following:

Name \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone Number w/ Ext. \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

Reason for Sale \_\_\_\_\_

Merchandise now on order (Use Additional Sheets if Necessary)

Date Ordered	Vendor's Name	Goods Ordered	Unit Cost

Proposed Beginning Date of Sale \_\_\_\_\_

Inventory Attached Must be on CD

Revised 12/4/2009

