CITY OF ASHLAND
Department of Finance
Occupational License / Net Profit Division
P.O. Box 1839, Ashland, KY 41105-1839
Phone No. 606/327-2013, 2014, or 2023 Fax No. 606/324-0978

Ashland
A Proud Past, A Bright Future

Notification of Business Activity Ceasing
Within the City Limits of Ashland, KY

Business Name: _____

Business License Number: _____

Reason for Closure Request: _____

Date Business Ceased: _____

Forwarding Address Information

Current Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Fax: _____

E-mail Address: _____

New Owner Information

New Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Fax: _____

E-mail Address: _____

I certify that all business activity has ceased within the City limits of Ashland, KY as of the date above. It is understood that the closing of this account shall in no way relieve the owner(s) of this business from any license fees due the City currently, or in the future, from being paid.

_____ _____ _____
Signature Title Date

For Internal Use Only

_____ _____
Signature Date