

Application For Going-Out-Of Business, Removal Or Damaged Goods Sale

Return to: City Clerk
City of Wheaton
P.O. Box 727
Wheaton, IL 60189-0727

Phone: 630-260-2012
Fax: 630-260-2017

NOTE: License not required for Court, State or Federally ordered sales, or person regularly engaged in the sale of insurance, salvage or damaged goods.

The undersigned hereby makes application for a "Going Out of Business, Removal or Damaged Goods Sale" license for a period commencing _____, and ending _____, indicated hereafter.

1. Business Name: _____

Address: _____

Email: _____

Phone: _____

2. Name and address of the applicant, who must be the owner of the goods to be sold, and in addition, if the applicant is a partnership, corporation, firm or association, the name and position of the individual filing such application.

3. The name and style in which such sale is to be conducted (check one):

- | | |
|---|--|
| <input type="checkbox"/> Going out of Business Sale | <input type="checkbox"/> Lost our Lease Sale |
| <input type="checkbox"/> Salvage Sale | <input type="checkbox"/> Assignee's Sale |
| <input type="checkbox"/> Insurance Sale | <input type="checkbox"/> Creditor's Sale |
| <input type="checkbox"/> Removal Sale | <input type="checkbox"/> Damaged Goods Sale |
| <input type="checkbox"/> Insolvent's Sale | <input type="checkbox"/> Liquidation Sale |
| <input type="checkbox"/> Other descriptive name of sale _____ | |

4. The address where such sale is to be conducted.

5. The dates and period of time during which the sale is to be conducted.

6. The name and address of the person or persons who will be in charge of and responsible for the conduct of such sale.

7. Make a full explanation with regard to the condition or necessity which is the occasion for such sale, including a statement of the descriptive name of the sale and the reasons why such name is truthfully descriptive of the sale.

If this is an application for a **Going Out of Business Sale** license, will the business be discontinued at the premises where the sale is to be conducted upon termination of the sale?

____ Yes ____ No

If this is an application for a **Removal Sale** license, will the business be discontinued at the premises where the sale is to be conducted upon termination of the sale, in addition to the location of the premises to which the business is to be moved?

____ Yes ____ No

If this is an application is for a **Damaged Goods Sale** license (sale of goods damaged by fire, smoke, water or otherwise), state as to the time, location and cause of such damage(s).

7. Attach a full, detailed and complete inventory of the goods that are to be sold, which inventory shall:

- A. itemization of the goods to be sold and contain sufficient information concerning each item, including make and brand name, if any, to clearly identify it;
- B. list separately any goods which were purchased during a 60-day period immediately prior to the date of making application for the license; and
- C. show the cost price of each item in the inventory together with the name and address of the seller of the item to the applicant, the date of the purchase, the date of the delivery of each item to the applicant and the total value of the inventory at cost.

Copy of application and inventory, with the cost removed, must be displayed in the place where the sale is to be held; also a copy of the license issued hereunder shall be attached to the front door of the premises where the sale is to be conducted in such a manner that it be clearly visible from the street.

Advertisements of the sale are to conspicuously show on its face the number of the license and date of expiration.

8. STATEMENTS:

I, the undersigned, hereby state that no goods will be added to the inventory after the application is made or during the sale and that the inventory contains no goods received on consignment.

I, the undersigned, hereby state that I have in the past maintained a place of business within the jurisdiction of the City of Wheaton where the goods so listed in his inventory have been sold or offered for sale for not less than four (4) months prior to the time of making application for this license. This subparagraph shall not apply to any applicant who acquired a right, title or interest in the goods as: 1) an heir, legatee or surviving joint tenant, or 2) an executor, administrator, trustee, or guardian, or 3) pursuant to an order or process of a court of competent jurisdiction.

I, the undersigned owner applicant, have not acquired right to the trade name of this business within six (6) months just prior to making this application. (If trade name of business has been acquired within the last six (6) months, applicant cannot use trade name).

I, the undersigned, hereby state that I have not conducted a similar sale on the same premises within one year previous to the starting date of this applied for sale and in the event that I have conducted a similar sale it was either an insurance sale, a salvage sale or a sale of damaged goods.

THE UNDERSIGNED, BEING DULY SWORN, HEREBY STATES THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE TO THE BEST OF HIS/HER KNOWLEDGE AND THAT ALL STATEMENTS SET FORTH ARE OF HIS/HER OWN FREE WILL.

WARNING TO APPLICANT. This application must be fully and accurately completed. False or misleading statements may subject applicant to the penalties of perjury in addition to other penalties provided by law.

Signature of Applicant

Subscribed and Sworn to before me

this ____ day of _____, 20_.

Notary Public

Date _____

Approved By: _____

Title: _____

Note: Initial Permit is for a 60-day period; a 30-day extension can be granted upon written request.

Addendum To Going Out Of Business, Removal Or Fire Sale

In the event the business for which the Going Out of Business, Removal or Fire Sale Permit was issued has not closed its business by the date shown on the permit, the applicant and/or owner of the business, hereby irrevocably represents and permits representatives of the City of Wheaton to enter the business on the next day after which the permit expires and remove any and all Going Out of Business, Removal or Fire Sale signs.

Dated: _____

Applicant and/or Owner of Business: _____
Signature

(Reference: State Statutes 815 ILCS 350/1 et seq)