



BUSINESS ACCOUNT CANCELLATION NOTICE

ACCOUNT NUMBER:

BUSINESS NAME:

BOLINGBROOK BUSINESS ADDRESS:

PHONE:

DATE OF CANCELLATION:

Please be advised that the business at the above named address has been closed and is no longer conducting business.

I, _____, understand that by signing and returning this notice, my business account will be cancelled, and once all pending obligations and debt have been satisfied, I will no longer be liable for annual business license fees.

SIGNATURE:

DATE:

PRINTED NAME:

CURRENT ADDRESS:

PHONE:

EMAIL ADDRESS:

REASON FOR CANCELLATION:

If you have any questions or concerns, please contact the Village Clerk's office at businesslicense@bolingbrook.com.