



## **BUSINESS TAX OUT OF BUSINESS OR SOLD AFFIDAVIT**

BUSINESS NAME		_
BUSINESS ADDRESS		_
BUSINESS TAX ACCT#	TANGIBLE TAX ACCT#	_
I HEREBY CERTI	IFY THAT THE ABOVE NAMED BUSINESS IN CHARLOTTE COUNTY	Y IS CLOSED.
DATE CLOSED:		
I HEREBY CERTIF	FY THAT THE ABOVE NAMED BUSINESS IN CHARLOTTE COUNTY	HAS BEEN SOLD.
DATE SOLD:		
IF BUSINESS	WAS SOLD PLEASE COMPLETE THE FOLLOWING INFO	ORMATION
BUYER NAME		
BUYER ADDRESS		
SALE PRICE	DID SALE PRICE INCLUDE ALL ASSETS?	
Under penalty of perjur correct.	ry I hereby certify that the facts stated in the foregoing docume	ent are true and
SIGNATURE	TITLE	
PRINTED NAME	CONTACT PHONE #	
DATE SIGNED		

**CHARLOTTE COUNTY TAX COLLECTOR** 

18500 Murdock Circle | Port Charlotte, FL 33948
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