



# TOWN OF CICERO

## *Business License Department*

4949 WEST CERMAK RD • CICERO, ILLINOIS 60804 • 2<sup>ND</sup> FLOOR  
708.656.3600 ext. 250, 253, 206 • FAX 708.656.0859

**Larry Dominick**  
Town President

**Ismael Vargas**  
Business License - Director

### **AFFIDAVIT FOR SELLING OR ADDING TO AN EXISTING BUSINESS**

\_\_\_\_\_, Cicero, Illinois.  
Name of Business, Address of Property

\_\_\_\_\_  
Name of current owner of business

\_\_\_\_\_  
Home Address City, State, Zip code

\_\_\_\_\_  
Phone number

I, the current owner of the business above mentioned, am selling my business to

\_\_\_\_\_  
**PRINT** Name of new (applicant) business owner X \_\_\_\_\_  
**SIGN** (New applicant)

I am hereby stating the following:

1. \_\_\_\_ that I will continue to run the above business but will be leasing a section to the above named. Section to be leased measures \_\_\_\_\_ square feet.
2. \_\_\_\_ that I will continue to run the above business until such time as a business license is issued to the new owner.
3. \_\_\_\_ that I will run the business until \_\_\_\_\_, 20\_\_\_\_, at which time I will close the business.
4. \_\_\_\_ that I hereby close my business effective \_\_\_\_\_, 20\_\_\_\_.

X \_\_\_\_\_  
Signature of current owner Date

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
NOTARY PUBLIC