



County of Imperial  
Planning & Development Services  
801 Main Street  
El Centro, CA 92243  
(442) 265-1736  
Email: [planninginfo@co.imperial.ca.us](mailto:planninginfo@co.imperial.ca.us)  
Website: [www.icpds.com](http://www.icpds.com)

## COMMERCIAL CANNABIS ACTIVITY LICENSE APPLICATION

# OUT OF BUSINESS NOTIFICATION FORM

Please complete this form if you are no longer operating a business in the County of Imperial.

I, \_\_\_\_\_, hereby certify that I am **NOT** doing business within  
(print full name)  
the County of Imperial.

BUSINESS NAME	BUSINESS ADDRESS	BUSINESS LICENSE ACCOUNT NUMBER	DATE BUSINESS CLOSED

### Select Reason for Closure

<input type="checkbox"/>	Ceased all Commercial Cannabis Activity business – no longer conduct any business activity
<input type="checkbox"/>	Sold Business
<input type="checkbox"/>	Sold Real Property
<input type="checkbox"/>	Changed Ownership (i.e. tax entity/incorporated)
<input type="checkbox"/>	Other – Please Specify:

I declare, under penalty of perjury, that I am authorized to complete this application form. To the best of my knowledge and belief, the provided information and statements are true and correct.

\_\_\_\_\_  
(print name)

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(date)

**NOTE: All signatures must be original wet signed signatures.**

### For Office Use Only:

Date / Time Rec'd \_\_\_\_\_ Rec'd By: \_\_\_\_\_

Additional Investigation Required:  Yes  No Investigation Completed:  Yes  No

File Closed Out On: \_\_\_\_\_ Closed By: \_\_\_\_\_