



7800 Katella Avenue Stanton, CA 90680
Phone: 714 379-9222 * Fax: 714 890-1443

BUSINESS LICENSE CANCEL FORM

“This form shall serve as a notification to the City of Stanton that said business has closed.”

CURRENT DATE: _____

BUSINESS LICENSE #: _____

NAME OF BUSINESS: _____

ADDRESS: _____

CANCEL DATE/EFFECTIVE: _____

BUSINESS OWNER SIGNATURE: _____

PRINT NAME: _____

For PARTNERSHIP status, both signatures are required to close the business.

BUSINESS OWNER SIGNATURE: _____

PRINT NAME: _____

If applicable, please list below the new business owner/s.

BUSINESS NAME: _____

BUSINESS OWNER: _____

*We appreciate the time invested with conducting your business in the City of Stanton
and we wish you the very best in all future endeavors.*