



Alameda County Office of the Treasurer and Tax Collector  
Business License Division  
224 W. Winton Avenue, Room 169  
Hayward, CA 94544  
(510) 670-6400

**Request to Close Business License**

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If this is a request from a legal entity (i.e. Corporation, LLC, etc.) please do not use this form. Submit your request on stationery with the company letterhead along with the information listed below and signed by a corporate officer. You must also provide documentation that you have dissolved your legal entity with the California Secretary of State. If you are only discontinuing business in unincorporated Alameda County your request on company letterhead should indicate this and dissolution is not required.

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Business License Number: \_\_\_\_\_

Business Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

DBA if any: \_\_\_\_\_

**(You must provide a certified copy that you have submitted an abandonment of fictitious business name with the Alameda County Clerk Recorder's Office.)**

Printed Name of Business Owner: \_\_\_\_\_

Printed Name of Secondary Business Owner: \_\_\_\_\_

**(You must provide a copy of ID or Driver's license for all listed business owners)**

I (We) certify that we ceased doing business in Unincorporated Alameda County effective \_\_\_\_\_. Should we reinstate doing business in Unincorporated Alameda County we understand that we must reapply for a business license and pay all required fees and resubmit all required documentation. **I understand that if there is a balance due on my account the payment must be made in cash.**

Signature of Business Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Secondary Business Owner: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE NOTE: If submitting request by mail, please submit the completed form and all documentation listed above to the address on the top of this form.**