

# Business License Cancellation Form

**Purpose:** This **business license cancellation form** is used to officially terminate the business license due to company closure. Please complete all sections to ensure compliance with legal requirements and to avoid future liabilities.

**Business/Company Name:**

**Business License Number:**

**Registered Business Address:**

**Business Owner/Authorized Representative:**

**Contact Number:**

**Email Address:**

**Effective Date of Company Closure:**

**Reason for License Cancellation / Company Closure:**

**Confirmation of Settled Obligations:**

- All taxes and government liabilities have been settled
- Employees have been properly notified and compensated
- Vendors and creditors have been informed

I confirm all obligations have been fulfilled

Signature	Date

**Note:** Please attach any supporting documents such as a copy of the business license, closure announcements, and clearance forms, if required.