

This is to advise that the business carried on under the name of

\_\_\_\_\_

*(business name)*

ceased to operate on \_\_\_\_\_

*(year / month / day)*

Please revoke the Certificate of Registration.

**Declaration**

All partners in the business (or the sole proprietor) must sign this declaration.

Signature(s) of sole proprietor or partners:

*(print or type name)*

*(signature)*

*(year / month / date)*

_____	_____	_____
_____	_____	_____
_____	_____	_____
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