



THE STATE
of **ALASKA**
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing

BUS

FOR DIVISION USE ONLY

Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
Business Licensing Section
Street: 333 Willoughby Avenue, 9th Floor, Juneau, AK 99801
Mail: PO Box 110806, Juneau, AK 99811-0806
Phone: (907) 465-2550 • Fax: (907) 465-2974
Website: *BusinessLicense.Alaska.Gov*

Business License: Request to Cancel or Inactivate

AS 43.70

This form is ONLY to request the Business Licensing Section to cancel or inactivate an Alaskan business license.

As a result of this filing the below business will cease to exist and will no longer have authority to engage in business activity under AS 43.70 in the State of Alaska.

Online filing is not available for this form. Submit this form by fax or mail. Do not email this form.

Processing Time: Standard processing time from March-September is 10-15 business days. During heavy business license filing seasons, October-February, the processing time will be delayed. Filings are reviewed in date order received. We do not offer expediting services.

No Fee:	<input type="checkbox"/> No fee is associated with this form.	\$0.00
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1. Business Name: (must match name on business license certificate)		
Business License Name:	_____	
Business License Number (<i>mandatory</i>):	_____	

2. Contact Information: where the Commissioner may mail documents regarding this business.		
Name:	_____	
Mailing Address:	_____	
City:	State:	Zip Code:
_____	_____	_____
Phone:	_____	
Email:	_____	

Business Name: (must match name in Item #1 on page 1)

Business Name: _____

3. Reason for Cancellation or Inactivation:

Provide a brief reason why you are requesting cancellation or inactivation of this business prior to its expiration date, for example:

- Going out of business
- Never started business
- Sold business
(per 12 AAC 12.050, a change in business ownership requires a new business license)
- Changing business name
(per 12 AAC 12.050, a change in business name requires a new business license)

Reason for cancellation or inactivation: _____

4. Signature:

The request to cancel this business license must be signed by the owner of the business.

- If the business is a sole proprietor, then the sole individual owner must sign.
- If the business is a partnership, then one of the owning partners must sign.
- If the business is owned by an entity, then the signer must be on the record with this office as an authorized signer for the owning entity and identify their signing authority, such as: corporation President or LLC member. Example: John Doe, President of owning entity XYZ Incorporated.

By my signature below, I declare under the penalty of perjury that the information provided on the application is true and correct to the best of my knowledge:

Signature of Owner: _____ **Date:** _____

Printed Name of Owner: _____

Title of Owner: _____

(Provide title based on the type of organization, such as; Sole Proprietor, Partner, or President of <owner entity name>, etc.)

IMPORTANT: Separate notification may be required to notify the Corporations Section and Professional Licensing Section of this Division. For more information, go to:

- www.Corporations.Alaska.Gov
- www.ProfessionalLicense.Alaska.Gov