BILL PAY AND LICENSING BUSINESS CLOSURE FORM



Terrebonne Parish Consolidated Government

Terrebonne Parish Consolidated Government requires that this form be completed and returned. Select the correct event below and fill in the associated information.

CLOSURE OF BUSINESS								
License Number								
Trade Name		Owner's Name						
Physical Address Street	City		State	Zip				
Mailing Address Street	City		State	Zip				
Phone Number Bu		Business Closure Date						
Signature			Date					

CHANGE OF MAILING ADDRESS									
License Number									
Trade Name		Owner's Name							
Physical Address Street	City		State	Zip					
New Mailing Address Street	Citu		State	Zip					
New Maining Address Street	City		Sidle						
Phone Number									
Circulture	Dete								
Signature			Date						

Return to: Terrebonne Parish Consolidated Government Attn: Bill Pay and Licensing Division P.O. Box 6097 Houma, LA 70361