


Hardeeville
SOUTH CAROLINA
Business Operation Status Change

Please check the reason for the change:

Business Closed

Address Change

Change of Ownership

Other

Date of Change: _____

Name of Business: _____

Correct Mailing Address: _____

Correct Business

Street Address: _____

Business Telephone: _____

Owner's Cell Phone: _____

Comments: _____

I verify that all the information on this form is correct.

Owner's Printed Name: _____

Owner's Signature: _____

Please email to coliver@hardeevillesc.gov