Business Transaction

Affidavit-Complete if you are purchasing an existing business with an "ACTIVE" license, involving only a change of ownership.

This form does not need to be completed if your business is a new build or structure and has not previously been issued a license by the Ohio State Cosmetology and Barber Board.

Affidavit

| State of Ohio, County | |
|---|--|
| I, hereby swear or affirm that an actual chelow. | hange of ownership has occurred regarding the business liste |
| Current Business Name | Current Business License # |
| Address | |
| Signature of Applicant | |
| Signature of former Owner or Representa | ative of Owner's Estate in the event of death of Owner |
| (both must be signed in the presence of a notary) | |
| Subscribed in my presence and sworn to | me this day of year |
| NOTARY SEAL | Notary Public (Commission Expiration Date Required) |
| | |

Completed form must be scanned or photographed and uploaded with your electronic application for a business license with a "Change of Ownership".

Forms that are Mailed or Faxed will NOT be accepted.