

**OCCUPATIONAL LICENSING SECTION  
NOTIFICATION BY LICENSEE  
OUT-OF-BUSINESS REPORT**

DMV USE ONLY					
OCCUPATIONAL LICENSING NUMBER					

**INSTRUCTIONS FOR LICENSEE:**

- Complete Sections 1 – 4.
- Submit notification and surrender supplies as required in Section 3 to DMV Inspector Office; address available at [www.dmv.ca.gov](http://www.dmv.ca.gov), Offices, Inspector Offices.

**SECTION 1 — BUSINESS INFORMATION**

BUSINESS NAME		OCCUPATIONAL LICENSING NUMBER	
ADDRESS	CITY	STATE	ZIP CODE

**SECTION 2 — DOB INFORMATION**

LOCATION GOING OUT OF BUSINESS (CHECK ONE BOX)		EFFECTIVE DATE	
<input type="checkbox"/> Main	<input type="checkbox"/> Branch	<input type="checkbox"/> Classroom	
REPORTED BY		TITLE	
FUTURE CONTACT ADDRESS	CITY	STATE	ZIP CODE
			FUTURE CONTACT TELEPHONE NUMBER ( )
REASON FOR CLOSING BUSINESS			

**SECTION 3 — LIST ALL SUPPLIES SURRENDERED (Attach separate sheet if additional space is needed.)**

**A. WALL LICENSES — List Occupational Licensing Number below and attach licenses to report.**

FORM CONTROL NUMBER (MAIN)	FORM CONTROL NUMBER (BRANCH)	FORM CONTROL NUMBER (BRANCH)	FORM CONTROL NUMBER (BRANCH)
MBL NUMBER (DRIVING SCHOOL INSTRUCTOR)	MBL NUMBER (DRIVING SCHOOL INSTRUCTOR)	MBL NUMBER (DRIVING SCHOOL INSTRUCTOR)	MBL NUMBER (DRIVING SCHOOL INSTRUCTOR)
MBL NUMBER (DRIVING SCHOOL INSTRUCTOR)	MBL NUMBER (DRIVING SCHOOL INSTRUCTOR)	MBL NUMBER (DRIVING SCHOOL INSTRUCTOR)	MBL NUMBER (DRIVING SCHOOL INSTRUCTOR)
MBL NUMBER (TRAFFIC VIOLATOR SCHOOL INSTRUCTOR)	MBL NUMBER (TRAFFIC VIOLATOR SCHOOL INSTRUCTOR)	MBL NUMBER (TRAFFIC VIOLATOR SCHOOL INSTRUCTOR)	MBL NUMBER (TRAFFIC VIOLATOR SCHOOL INSTRUCTOR)
MBL NUMBER (TRAFFIC VIOLATOR SCHOOL INSTRUCTOR)	MBL NUMBER (TRAFFIC VIOLATOR SCHOOL INSTRUCTOR)	MBL NUMBER (TRAFFIC VIOLATOR SCHOOL INSTRUCTOR)	MBL NUMBER (TRAFFIC VIOLATOR SCHOOL INSTRUCTOR)

**B. ACCOUNTABLE INVENTORY**

REPORT OF SALES, NOTICE TO DISMANTLER, DS/TVS OR OTHER NUMBERED CERTIFICATES, ETC.	TYPE	BUY/SELL HELD FOR REISSUANCE	LOST OR STOLLEN	UNUSED DESTROYED
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N
# to				<input type="checkbox"/> Y <input type="checkbox"/> N

OCCUPATIONAL LICENSING NUMBER IF BUY/SELL REPORT OF SALES ISSUED



**SECTION 3 — LIST ALL SUPPLIES SURRENDERED** (Attach separate sheet if additional space is needed.) (continued)**C. SPECIAL PLATES AND REGISTRATION CARDS — List license numbers and attach licenses to report.**

PLATE NUMBER(S)	REGISTRATION CARD(S) NUMBER(S)	LOST OR STOLEN	SURRENDERED
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N
			<input type="checkbox"/> Y <input type="checkbox"/> N

**SECTION 4 — LICENSEE CERTIFICATION**

Initials \_\_\_\_\_

Whenever the department cancels, suspends, or revokes any license issued pursuant to Division 5 (commencing with §11100), the licensee or person in possession shall immediately return the license, documents, plates, certificates, and other evidence of the licensed to the department. *California Vehicle Code (CVC) §8803.*

***I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.***

PRINTED NAME	TITLE
SIGNATURE <b>X</b>	DATE SIGNED

**SECTION 5 — STOP PLACED AND COMMENTS**☐ No ☐ Yes

COMMENTS

**SECTION 6 — INSPECTOR/SUPERVISOR CERTIFICATION**

INSPECTOR NAME	INSPECTOR NUMBER
SIGNATURE <b>X</b>	DATE SIGNED
SUPERVISING INSPECTOR NAME	NUMBER OF ATTACHMENTS
SUPERVISING INSPECTOR APPROVAL SIGNATURE <b>X</b>	DATE SIGNED