

AFFIDAVIT for SERVICE TERMINATION

OFFICE USE ONLY	
Registration #	_____
Reviewed by	_____
Terminate	_____ Date _____
Comment:	_____

State of North Carolina in the County of _____

I, the undersigned _____, owner of
(print your name)
_____, being duly sworn do verify
(print name of Tanning Equipment Service on Registration)

or affirm the following:

As of the _____ I ceased offering tanning equipment
(month/day/year)
service to tanning facilities registered pursuant to 10A NCAC 15 .1405.

Please check the box that is applicable:

1. I no longer offer Class I sales of tanning equipment and components.

2. I no longer offer Class II installation and service of tanning equipment.

3. I no longer offer Class III tanning facility consultation and operator training.

I have personally completed the statement above and attest to its veracity, and I hereby request termination of my Tanning Equipment Service Registration.

(signature of owner)

(date)

NOTARY STATEMENT

_____, appeared before me this the ____ day of _____,
(Print your name)
_____, was duly sworn and made this statement. I, _____,
(Year) (Name of Notary)
am a Notary Public commissioned in _____ County, North Carolina.

My commission expires _____.