



ATLANTA
RETAILERS
ASSOCIATION

2055 North Brown Road, Suite 200
Lawrenceville, GA 30043
Ph: 770-455-4455
Fax: 404-478-8525
E-mail: admin@araonline.us

ARA Membership Close Form

With this form I am informing that I have sold my ARA Member store located at the address below:

Store Closed Sold to Ismaili Sold to Non-Ismaili

Reason for Closing: _____

Date Sold/Closed: _____ ARA#: _____

Primary Owner's Full Name: _____

Corporation Name: _____ DBA: _____

Store Address, City, State & Zip: _____

New owner contact information:

Name: _____ Phone#: _____ Email: _____

Does the store currently have a Digital Spanner Board: Yes No

Does the store currently have an External Spanner Board: Yes No

Does the store currently have Back Office software: Yes No

If yes, check one: **Modisoft** ___ **Mercury One** ___ **Other**___

NOTE: Pending rebate will go to your current ACH Bank account. No checks will be issued hereinafter unless requested in writing. \$50 check processing fee will apply on all paper checks issued

Mailing Address: _____

City: _____ State: _____ Zip: _____ Cell#: _____ Alt#: _____

I hereby declare that all the information provided is correct and true.

Authorized Signature **Date**
(Please include a copy of picture ID of Primary Member)

For office use only:
Close form received on: _____ Received by: _____

Notes (if any): _____