

APPLICATION FOR A BUSINESS LICENSE

BUSINESS NAME (d/b/a)		BUSINESS TELEPHONE ()	
PHYSICAL ADDRESS	CITY	STATE	ZIP CODE
MAILING ADDRESS	CITY	STATE	ZIP CODE
OWNERS, PARTNERS, AND/OR PRINCIPALS IF CORPORATION NAME AND ADDRESS - USE SEPERATE SHEET IF NECESSARY	DATE OF BIRTH	DRIVERS LICENSE NO.	HOME PHONE NO.
TYPE OF BUSINESS - (CHECK APPLICABLE BOX(S) BELOW)			
<input type="checkbox"/> MANUFACTURING <input type="checkbox"/> CONSTRUCTION <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> RENTALS <input type="checkbox"/> SERVICE <input type="checkbox"/> OTHER _____			
<input type="checkbox"/> RETAIL CONSUMER SALES <input type="checkbox"/> SALES FOR RESALE/WHOLESALE % BUSINESS WILL DO IN RETAIL _____ WHOLESALE _____			
BRIEF DESCRIPTION			
APPROXIMATE GROSS	ACCOUNT NUMBER OF PRIOR BUSINESS	DATE BEGAN BUSINESS IN Perdido Beach / /	
FEDERAL I.D. NUMBER or SSN	STATE TAX NUMBER	CONTRACTOR NUMBER	
THIS TEMPORARY LICENSE DOES NOT AUTHORIZE THE SALE OF ANY ALCOHOLIC BEVERAGES <input type="checkbox"/> RESTAURANT <input type="checkbox"/> LOUNGE <input type="checkbox"/> RETAIL <input type="checkbox"/> CLUB CHECK ALCOHOLIC BEVERAGES TO BE SOLD <input type="checkbox"/> LIQUOR <input type="checkbox"/> WINE <input type="checkbox"/> BEER			
I CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT MY LICENSE CAN BE REVOKED FOR ANY FALSE STATEMENT MADE HEREIN.			
SIGNATURE _____	TITLE _____	DATE _____	
DO NOT WRITE BELOW THIS LINE			
ACCOUNT NUMBER	\$ _____	RECEIPT NUMBER	DATE
LICENSE CODES	DEPOSIT / ADVANCE	APPLICATION / DEPOSIT ACCEPTED BY	DATE
_____	<input type="checkbox"/> CITY/TOWN LIMIT	_____	_____
_____	<input type="checkbox"/> POLICE JURISDICTION	_____	_____
_____	<input type="checkbox"/> OTHER	_____	_____
<input type="checkbox"/> LICENSE APPROVED _____ _____			
<input type="checkbox"/> LICENSE DENIED _____ _____			