

# BUSINESS LICENSE APPLICATION

The City Does Impose the Business License Tax in Its Police Jurisdiction

<p><b>Complete and Mail/Fax/Email to:</b>                  City of Guntersville                  341 Gunter Avenue                  Guntersville, AL 35976                  Phone 256-571-7560                  Fax 256-571-7578                  brittney.shaneyfelt@guntersvilleal.org</p>	<p style="text-align: center;"><b>Applicant Complete this Box:</b></p> FEIN _____ RDS/Sales Tax # _____ NAICS# (If Known) _____ <p style="text-align: center;"><b>Form of Ownership (Check One):</b></p> Sole Prop <input type="checkbox"/> Partnership <input type="checkbox"/> Corp <input type="checkbox"/> Prof Assoc <input type="checkbox"/> LLC <input type="checkbox"/> Other _____
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**Application Type (Please Print or Type):** New  Owner Change  Name Change  Location Change

Legal Business Name: \_\_\_\_\_

Trade Name (If different from above): \_\_\_\_\_

Business Activities (Brief description – Retail clothing sales, wholesale food sales, rental of industrial equipment, computer consulting, restaurant, etc):  
 \_\_\_\_\_

Physical Address \_\_\_\_\_  
 Street City State Zip

Mailing Address \_\_\_\_\_  
 Street City State Zip

Telephone \_\_\_\_\_  
 Business Fax Home Phone

Name & Phone # for Contact Person \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Email Address for Contact \_\_\_\_\_

List Following for Owner(s), Partners, or Officers (Attach separate sheet if necessary):

Name	Residence Address	SSN (If not publicly traded co.)	Title

Date Business Activity Initiated or Proposed in Guntersville \_\_\_\_\_ # of Employees in Guntersville \_\_\_\_\_

This application has been examined by me and is, to the best of my knowledge, a true and complete representation of the above named entity, and person(s) listed

\_\_\_\_\_  
 Date Signature Title

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**For Municipal use only • Business License Information:**

Date Application Given: \_\_\_\_\_ By: \_\_\_\_\_

*Building Inspection Office 256-571-7564*

*Jimmy Hanson ~ Building Official • Cheryl Smythe ~ Ordinance Enforcement Officer*

Building Official/Inspector Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Fire Marshall Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**Business ID#:** \_\_\_\_\_ **Date Issued:** \_\_\_\_\_ **License #:** \_\_\_\_\_ **Clerk:** \_\_\_\_\_