

BUSINESS LICENSE APPLICATION  
CITY OF WETUMPKA, ALABAMA



Mail to:  
CITY OF WETUMPKA  
P.O. BOX 1180  
WETUMPKA, AL 36092  
334-567-1301  
334-567-1307 (FAX)

PLEASE PRINT OR TYPE

**Applicant**  
FED ID# \_\_\_\_\_  
**Form of Ownership (Check One)**  
 Sole Proprietor     Partnership  
 Corporation       Professional Assoc  
 LLC                     Other \_\_\_\_\_

Application Type:     New     Renewal     Owner Change     Name Change     Location Change

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

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

Business Type \_\_\_\_\_ Organization Type \_\_\_\_\_

Business Activity Description \_\_\_\_\_

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

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

Telephone: Business \_\_\_\_\_ Cell \_\_\_\_\_ Home (Emergency) \_\_\_\_\_

Email: \_\_\_\_\_

ALATAX # (Sales Tax) \_\_\_\_\_ AlaTax Taxpayer Name \_\_\_\_\_

Name / Phone # for Contact Person \_\_\_\_\_

List Names of Owner(s), Partners, or Officers (Attach separate sheet if necessary)

Name	Address	SSN	Title

Date Business Activity Initiated or Proposed in Wetumpka \_\_\_\_\_

If Business was acquired from a previous owner, or a change in the organization has occurred, provide the following information:

Date of Change: \_\_\_\_\_ Previous Owner/Organization \_\_\_\_\_ Former Name \_\_\_\_\_

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

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