Complete and Mail

CITY OF_WETUMPKA P.O. Box 1180 WETUMPKA, AL 36092 (334) 567-1301 334-567-1307 (FAX)

(CONFIDENTIAL)

Please Print or Type SEE REVERSE SIDE FOR INSTRUCTIONS AND FURTHER INFORMATION

Applicant Complete This Box						
FED ID#						
Form of Ownershi						
Sole Proprietor	Partnership					
Corporation	Professional Assoc.					
	Other					

APPLICATION TY	PE:	■ NEW	RENEWAL	OWNER CHANGE	NAME CHANGE	LOCATION CHANGE
Legal Busines	s Name	:				
Trade Name:	(If differ	ent from al	oove):			
Business Activ	vity Des	cription:_				
Physical Address	(Street)			(01)	(0)-1-1	(7:)
Mailing Address:				(City)	(State)	(Zip)
Mailing Addicess.	(Street)			(City)	(State)	(Zip)
Telephone:	(Busine	ss)		(Cell)	(Home Ph	none – In Case Of Emergency)
ALATAX (Sales Ta	ax) #		AlaTa	« Taxpayer Name:	E	mail:
Name		(S), Partie	Residence Address	(Attach separate sho	•	:
	as acqu	ired from	•		ne organization has occ	curred, provide the
			CE.			
This application hand person(s) list		examined by	me and is, to the b	est of my knowledge, a t	true and complete represent	ation of the above named entity,
Date		Signatur	e		Title	

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INFORMATION
INFORMATION CONCERNING THE
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PLEASE COMPLETE ALL AREAS OF THE FORM EXCEPT FOR THE SHADED AREA AT THE BOTTOM.

FORM SHOULD BE TYPED OR PRINTED LEGIBLY

FORM SHOULD BE DATED AND SIGNED BY AN OWNER, PARTNER, OR OFFICER OF THE BUSINESS

FORM WILL INITIATE THE PROCESS FOR REGISTERING YOUR BUSINESS WITH THE MUNICIPALITY

- ==>IF YOUR BUSINESS WILL HAVE A PHYSICAL LOCATION WITHIN THE MUNICIPALITY, PLEASE USE THAT ADDRESS ON THE FRONT OF THIS FORM. (Complete separate forms for each physical location in the City.)
- ==> UPON RECEIPT OF THE COMPLETED FORM, THE MUNICIPALITY WILL PROVIDE ANY ADDITONAL FORMS AND INFORMATION REGARDING OTHER SPECIFIC REQUIREMENTS TO YOU IN ORDER TO COMPLETE THE LICENSING PROCESS.

ALL LICENSE RENEWALS ARE DUE JANUARY 1 AND DELINQUENT AFTER FEBRUARY 15th EACH YEAR

THIS FORM IS INTENDED AS A SIMPLIFIED, STANDARD MECHANISM FOR BUSINESSES TO INITIATE CONTACT WITH A MUNICIPALITY CONCERNING THEIR ACTIVITIES WITHIN THAT CITY. A BUSINESS LICENSE WILL BE REQUIRED PRIOR TO ENGAGING IN BUSINESS. IF A BUSINESS INTENDS TO MAINTAIN A PHYSICAL LOCATION WITHIN THE CITY, THERE ARE NORMALLY ZONING AND BUILDING CODE APPROVALS REQUIRED PRIOR TO THE ISSUANCE OF A LICENSE.

IN CERTAIN INSTANCES, A BUSINESS MAY SIMPLY BE REQUIRED TO REGISTER WITH THE CITY TO CREATE A MECHANISM FOR THE REPORTING AND PAYMENT OF ANY TAX LIABILITIES. IF THAT IS THE CASE, YOU WILL BE PROVIDED THE MATERIALS FOR THAT REGISTRATION PROCESS.

THE COMPLETION AND SUBMISSION OF THIS FORM DOES NOT GUARANTEE THE APPROVAL OR SUBSEQUENT ISSUANCE OF A LICENSE TO DO BUSINESS. ANY PREREQUISITES FOR A PARTICULAR TYPE AND LOCATION OF THE BUSINESS MUST BE SATISFIED PRIOR TO LICENSING.

SHOULD THERE BE ANY QUESTIONS CONCERNING THE COMPLETION OF THIS FORM OR THE LICENSING AND/OR REGISTRATION PROCESS, PLEASE CALL THE NUMBER ON THE FRONT OF THIS FORM TO OBTAIN A MORE DETAILED EXPLANATION.

THIS AREA FOR MUNICIPAL USE ONLY					
ACCOUNT ID #	REVIEWED BY:				
PHYSICAL LOCATION:	☐ POLICE JURISDICTION ☐ OUTSIDE CORP LIMITS & PJ				
ZONING CLASSIFICATION: BUILDING APPROVAL: \[YES \] NO \[N/A \] FIRE CODE					
TAX TYPES: SALES/SELLER'S USE	☐ CONSUMER USE ☐ RENTAL ☐ LODGINGS ☐ ALCOHOL				
OCCUPATIONAL	☐ TOBACCO ☐ GAS/MOTOR FUEL ☐ BUSINESS LICENSE				
TAX FILING FREQUENCY: MONTHLY	☐ QUARTERLY ☐ ANNUAL ☐ OTHER				
BUSINESS TYPE: RETAIL	☐ WHOLESALE ☐ BUILDING CONTRACTOR ☐ SERVICE ☐ PROFESSIONAL				
MANUFACTURER RENTAL OTHER					