



BUSINESS LICENSE APPLICATION

May be subject to Zoning Review/Fire Inspection

License Fee **\$50**. If renewed by Dec 31. Fee is **\$25**

For City Use: Issue Date: _____ License #: _____

Please Note: Incomplete applications will be returned for additional information.

Business Name: _____

Business Address: _____ **Suite #** _____

Business Owner: _____ **Business Phone:** _____

Business Email: _____

- Business mailing address is the same as physical address.
- Business mailing address is different than physical address – *list below*.

_____ City _____ ZIP _____

Nature of Business: _____

- Nature of Business: Daycare Facility (***Include a copy of your State Daycare License***)
- Home Occupation (Is this business operated out of your residence?) YES / NO

Owner Phone: _____ **Emergency Phone:** _____

Owner Email: _____

Owner Mailing Address: _____ City _____ ZIP _____

Signature of Owner or Representative _____ Please Print Name _____ Date _____

After Hour Contacts and / or authorized persons to receive notices permitted or required by law (**Please Print**)

1. _____ **Phone #:** _____

2. _____ **Phone #:** _____

Northside Fire District Information: Single Story _____ Two Story _____ Other _____

Will Nature of business create hazardous smoke, noise, odor, or dust? **YES** _____ **NO** _____

Are there any CHEMICALS or other FLAMMABLE MATERIALS stored in the building? **YES** _____ **NO** _____

If YES, please List: _____

What area or areas of the building are they stored? _____

Insurance Company: _____ Policy # _____

Alarm System? **YES** _____ **NO** _____ Company: _____ Phone: _____

Occupancy Type (optional) _____