



REVENUE DEPARTMENT
 P.O. BOX 311000
 ENTERPRISE, ALABAMA 36331
 PHONE: (334) 348-2606
 FAX: (334) 348-2613

FEIN#: _____
APPLICATION DATE: _____

BUSINESS LICENSE APPLICATION
(CONFIDENTIAL)

APPLICATION TYPE: NEW RENEWAL NAME CHANGE OWNER CHANGE LOCATION CHANGE

TYPE OF LICENSE: REGULAR LICENSE SPECIAL EVENT NON-PROFIT(TAX-EXEMPT)

BUSINESS ORGANIZATION: INDIVIDUAL PARTNERSHIP CORPORATION LLC S-CORP OTHER

LEGAL BUSINESS NAME: _____

TRADE NAME (If different from above): _____

PHYSICAL ADDRESS: _____
 (Street) (City) (County) (State) (Zip)

MAILING ADDRESS: _____
 (Street) (City) (County) (State) (Zip)

TELEPHONE/EMAIL: _____
 (Business) (Fax) (Emergency) (Email)

BUSINESS ACTIVITIES:(Example: Contractor/Sub or General, Retail/clothing sales, wholesale foods, Equip. rental, computer consulting,etc)

CONTACT PERSON: _____
 (Name) (Phone) (Email)

LIST NAMES OF OWNER(S), PARTNER(S), OR OFFICER(S) (Attach separate sheet if necessary)

<u>Name</u>	<u>Residence Address</u>	<u>SSN</u>	<u>Title</u>

Date Business Activity Initiated or Proposed in Enterprise, AL: _____ **# of Employees in Enterprise, AL:** _____

Name of Authorized Person: _____ **Signature of Authorized Person:** _____ **Title:** _____

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 persons listed.

THIS AREA FOR MUNICIPAL USE ONLY

ACCOUNT ID: _____	REVIEWED BY: _____
PHYSICAL LOCATION: <input type="checkbox"/> CITY <input type="checkbox"/> POLICE JURISDICTION <input type="checkbox"/> OUTSIDE CORP LIMITS & PJ	
ZONING CLASSIFICATION: _____ BUILDING APPROVAL: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A FIRE CODE	
TAX TYPES: <input type="checkbox"/> SALES/SELLER'S USE <input type="checkbox"/> CONSUMER USE <input type="checkbox"/> RENTAL <input type="checkbox"/> LODGINGS <input type="checkbox"/> ALCOHOL	
<input type="checkbox"/> OCCUPATIONAL <input type="checkbox"/> TOBACCO <input type="checkbox"/> GAS/MOTOR FUEL <input type="checkbox"/> BUSINESS LICENSE	
TAX FILING FREQUENCY: <input type="checkbox"/> MONTHLY <input type="checkbox"/> QUARTERLY <input type="checkbox"/> ANNUAL <input type="checkbox"/> OTHER _____	
BUSINESS TYPE: <input type="checkbox"/> RETAIL <input type="checkbox"/> WHOLESALE <input type="checkbox"/> BUILDING CONTRACTOR <input type="checkbox"/> SERVICE <input type="checkbox"/> PROFESSIONAL	
<input type="checkbox"/> MANUFACTURER <input type="checkbox"/> RENTAL <input type="checkbox"/> OTHER _____	

PLEASE READ THE FOLLOWING INFORMATION CONCERNING THE COMPLETION OF THIS FORM

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 ADDITIONAL FORMS AND INFORMATION REGARDING OTHER SPECIFIC REQUIREMENTS TO YOU IN ORDER TO COMPLETE THE LICENSING PROCESS.

ALL LICENSE RENEWALS ARE DUE JANUARY 1ST AND DELINQUENT AFTER FEBRUARY 15TH, WITH THE FOLLOWING EXCEPTION:

INSURANCE COMPANY LICENSE: DUE MARCH 1, DELINQUENT AFTER MARCH 31

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 IS NORMALLY ZONING AND BUILDING CODE APPROVALS REQUIRED PRIOR TO THE ISSUANCE OF A LICENSE. **NOTE: It is the business owner's responsibility to check with Zoning Officials regarding restrictions at a possible business location.**

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 (334) 348-2606 TO OBTAIN MORE DETAILED INFORMATION.

COUNCIL

SONYA W. RICH, *District 1*
EUGENE GOOLSBY, *District 2*
GREG PADGETT, *District 3*
SCOTTY JOHNSON, *District 4*
TURNER TOWNSEND, *District 5*

City of Enterprise

WILLIAM E. (BILL) COOPER, MAYOR

501 South Main
P. O. Box 311000
Enterprise, Alabama 36331-1000

CITY ADMINISTRATOR
JONATHAN TULLOS

INTERIM CITY CLERK
BEVERLY SWEENEY

(334) 347-1211
(334) 348-2613 FAX

DECLARATION AND VERIFICATION OF CITIZENSHIP/AUTHORIZED ALIEN STATUS FORM

As per the provisions of State of Alabama Act 2011-535, the **Beason-Hammon Taxpayer and Citizen Protection Act**, I hereby declare that I am

_____ A Citizen of the United States.

_____ An Alien lawfully present in the United States

Printed Name: _____

Signature: _____ Date: _____



Boll Weevil Monument - The Only Monument in The World Glorifying A Pest

UPDATED: 11/23/2020