

**TOWN OF ADDISON, ALABAMA BUSINESS APPLICATION**  
**The Town Does Impose the Business License Tax in its Police Jurisdiction**

(CONFIDENTIAL)

Complete and Mail

TOWN OF ADDISON  
P.O. Box 98  
ADDISON, AL. 35540  
(256) 747-2971  
FAX (256) 747-1944

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

Applicant Complete This Box

TIN \_\_\_\_\_  
ST of Ala Tax # \_\_\_\_\_

Form of Ownership (Check One)

- |  |  |
|--|--|
| <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> Partnership         |
| <input type="checkbox"/> Corporation     | <input type="checkbox"/> Professional Assoc. |
| <input type="checkbox"/> LLC             | <input type="checkbox"/> Other _____         |

APPLICATION TYPE:    NEW       RENEWAL       OWNER CHANGE       NAME CHANGE       LOCATION CHANGE

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

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

Business Activities: (Brief desc. - example. retail clothing sales, wholesale food sales, rental of industrial equip., computer consulting, etc)

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

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

Telephone: \_\_\_\_\_  
( Business) (Fax) (Home Phone – In Case Of Emergency )

Email: \_\_\_\_\_ AlaTax Acct.#: \_\_\_\_\_ AlaTax Taxpayer Name: \_\_\_\_\_

Name/Phone # for Contact Person: \_\_\_\_\_ ( ) \_\_\_\_\_

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

<u>Name</u>	<u>Residence Address</u>	<u>SSN</u>	<u>Title</u>
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Date Business Activity Initiated or Proposed in ADDISON: \_\_\_\_\_ # of Employees in ADDISON \_\_\_\_\_

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 \_\_\_\_\_

**THIS AREA FOR MUNICIPAL USE ONLY**

ACCOUNT ID # \_\_\_\_\_ REVIEWED BY: \_\_\_\_\_

PHYSICAL LOCATION:    CITY       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 \_\_\_\_\_

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

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==> 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.

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ALL LICENSE RENEWALS ARE DUE JANUARY 1 AND DELINQUENT AFTER JANUARY 31, WITH THE FOLLOWING EXCEPTION:

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

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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.

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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.