

CITY OF ENTERPRISE

Business License Application

200

Business Owners – Please complete and submit this form with your signature and appropriate fees. All City Business Licenses Expire on December 31st. Incomplete forms will be returned for completion.

| Business Name: | | |
|---|--|----------------------------------|
| Owner's Name(s): | | |
| Business Address: Physical: | | PO Box: |
| City: | State: | Zip: |
| Owner's Address (if different): | | |
| Business Phone: | Owner's Phone: | |
| Business Tax ID or SSN: | Professional License | #: |
| Bonding Co: | Bond #: | |
| Insurance Co: | Policy#: | |
| Email Address: | | |
| Business Description: | | |
| Fee Amount: \$ (Lice latest fee schedule contact the Enterprise (| | s License Fee Schedule - for the |
| <u>IMF</u> | PORTANT REQUIREMENTS | |
| | complete and appropriate fees paid prie license (contractors, daycares, hair ster listed on this renewal form. | |
| | CERTIFICATE | |
| I hereby certify that I have examined this for knowledge and belief true and complete. I | | |
| I also hereby certify that this home employees, <u>NO</u> customers/clients coming to business, and there is <u>NO</u> outside business | | e to accommodate this |
| Agent, Officer or Owner's Signature: | | |
| Please Print Name: | Title: | Date: |
| For Office Use Only: | | |
| Rusiness License Number: Am | ount Paid: Date Paid: | Received By: |