

City of Headland
 25 Grove Street
 Headland, AL 36345
 (334) 785-5600

BUSINESS APPLICATION

| | |
|--------------------|--|
| Type of Business | <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Contractor <input type="checkbox"/> Service <input type="checkbox"/> Professional <input type="checkbox"/> Rental <input type="checkbox"/> <input type="checkbox"/> Manufacturer <input type="checkbox"/> Other (Describe business) |
| Owner/Contact Name | |
| DBA | |
| Mailing Address | |
| City, State, Zip | |
| Phone Number | |
| FEIN/SSN# | |
| State Permit # | |
| E-Verify # | |
| Physical Address | |
| City, State, Zip | |
| Email Address | |

Determining License Fee(s)

Use the table below to list the types of business to be conducted. List in Column A & B all the type(s) of business conducted. In Column C, report the amount requested if applicable. Column D only applies to those whose fee is based upon a "number" of units. Column E lists the base/flat fee. In Column F, you must report your additional amount due based upon calculation of license. Enter the sum of Column E and F in Column G. Total Column G down and include issuance fee.

| Column A | Column B | Column C | Column D | Column E | Column F | Column G |
|-----------------|-----------------|----------------|-----------------------------|---------------|--|-----------------|
| Schedule Number | Type of License | Gross Receipts | Unit Amount (if applicable) | Flat Base Fee | Additional Amount Due Based on Calculation | License Fee Due |
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Any individuals/entities required to have a State Permit/Certificate/License must submit a copy of documentation with this application before the City of Headland can issue a business license.*

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| For additional information or questions please contact Susan Money at (334) 785-5600 ext 2 | Issuance Fee: | 12.00 |
| | Total: | |

I hereby swear that the amount of capital invested or value of goods, stocks, furniture and fixtures or amount of sales or receipts as required for disclosure in order to obtain a business license has been examined by me and to the best of my knowledge is true, correct, and complete. I understand that issuance of license does not permit business operation unless business is properly zones and/or in compliance with all applicable State/City laws.

Signed: _____ **Date** _____

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|---------------------------------|------------|
| MUNICIPAL USE ONLY | |
| ZONING COMPLIANCE OFFICER _____ | DATE _____ |
| FIRE MARSHALL _____ | DATE _____ |