

CITY OF SHEFFIELD, ALABAMA BUSINESS APPLICATI

Complete & Mail to:

City of Sheffield
P.O. Box 380
Sheffield, Alabama 35660
256-383-0250 256-386-5602
E-mail: lisae08@sheffieldalabama.org
www.sheffieldalabama.org

(CONFIDENTIAL)

NAICS Codes:

Account #:

Open Date:

Please fill out completely. Make any necessary changes. Failure to complete & sign will result in a delay in issuing business license. See page 2 for fee calculation schedules.

APPLICATION TYPE: [ ] NEW [ ] RENEWAL [ ] OWNER CHANGE [ ] NAME CHANGE [ ] LOCATION CHANGE

Business Name: \_\_\_\_\_ DBA \_\_\_\_\_

ATTN: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_

If Physical Address is different from Mailing Address please list:

Zoning [ ]

Physical Address: \_\_\_\_\_ Sheffield businesses only:

Do You own or rent this property? \_\_\_\_\_

City,St,Zip: \_\_\_\_\_ If you rent, who is the owner? \_\_\_\_\_

If you are required to pay sales tax, please list your STACS Account Number and Name:

STACS # \_\_\_\_\_ STACS Name \_\_\_\_\_

If necessary, have you been approved by: Fire Marshall \_\_\_\_\_ Health Department \_\_\_\_\_ ABC Board \_\_\_\_\_

Can you show proof of: State License \_\_\_\_\_ Insurance \_\_\_\_\_

Business Activities: (ex: Retail Clothing, Wholesale Food, Rental of Industrial Equipment, Computer Consulting, etc.)

CONTACTS:

Business Phone: \_\_\_\_\_

Business Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Link to Your Website: \_\_\_\_\_

Contact Person for License Information: \_\_\_\_\_ Contact Person's Phone: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If located in Sheffield:

Please provide a responsible party to be called in case of emergency at the business location after hours. This information will be made available to the Police Department.

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

OWNERS:

List Names of Owners, Partners, or Officers (Attach a separate sheet if necessary)

Driver License Number/Stat

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I would like my renewals sent to me by E-Mail [ ] Fax [ ] US Postal Mail [ ]

This application has been examined by me and is, to the best of my knowledge, a true & complete representation of the above named entity, and person(s) listed. Under penalty of perjury, I, the undersigned do hereby declare that I am a United States citizen or that I am an alien lawfully present in the United States.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_