

**TOWN OF NEW SITE, ALABAMA BUSINESS LICENSE APPLICATION**  
**The Town Imposes its Business License Tax within its Police Jurisdiction**

(CONFIDENTIAL)

<b>Complete and Mail/Fax/Email To:</b>
<b>TOWN OF NEW SITE</b> <b>12791 HWY. 22 EAST</b> <b>NEW SITE, AL 36256</b> <b>townofnewsite1@charter.net</b>  (256)234-2049 Fax (256)234-2887

Applicant Complete This Box	
FEIN _____	_____
ST of ALA TAX # _____	_____
FORM OF OWNERSHIP (Check One)	
Sole Prop. _____	Partnership _____
Corp. _____	Prof Assoc _____
LLC _____	Other _____

*Please Print or Type*

**SEE REVERSE SIDE FOR INSTRUCTIONS AND FURTHER INFORMATION**

**Application Type :** New \_\_\_\_\_ Renewal \_\_\_\_\_ Owner Change \_\_\_\_\_ Name Change \_\_\_\_\_

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

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

**Business Activities :** (brief description- 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)

**Name & Phone # for Contact Person** \_\_\_\_\_ ( ) \_\_\_\_\_

**Email address for contact:** \_\_\_\_\_ **# of Employees** \_\_\_\_\_

**List Following for Owner(s), Partners, or Officers (Attach separate sheet if necessary)**

Name	Residence Address	SSN (if sole proprietor)	Title

**Date Business Activity Initiated or Proposed in New Site:** \_\_\_\_\_

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**

**NAICS CODE #** \_\_\_\_\_ **REVIEWED BY:** \_\_\_\_\_

**PHYSICAL LOCATION:**  TOWN  POLICE JURISDICTION  OUTSIDE TOWN LIMITS & PJ

**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)**

⇒ ***AFTER COMPLETING THIS FORM IT CAN BE MAILED, SENT BY FAX, OR WHERE POSSIBLE, SENT BY ELECTRONIC MAIL TO THE MUNICIPALITY.***

⇒ **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 (or February 15), WITH THE FOLLOWING EXCEPTIONS:**

**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.

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 MORE DETAILED EXPLANATION.**