CITY OF IRONDALE, ALABAMA BUSINESS APPLICATION

Complete and Mail/Fax to: City of Irondale

(CONFIDENTIAL) TAXPAYER ID ACCOUNT #_____ COST OF JOB \$_____ NAICS ______

P.O. Box 100188 Irondale AL 35210 Revenue@cityofirondaleal.gov Phone (205) 956-9200 Fax (205) 951-1425	COST OF JOB \$	NAICS	NAICS	
	STATE ID #	Form of Ownership (Ch	Form of Ownership (Check One)	
		Sole Proprietor Corporation	Partnership Professional Assoc.	
		LLC	Other	
APPLICATION TYPE: New I	Location Change Mail Change	Name Change Updat	te	
Legal Business Name:				
Frade Name: (If different from abo	ve)			
Federal ID number or Social Securi	ty Number (if sole-prop with no empl	oyees) :		
If leasing property for business loc	ation please list landlord/mgmt co: _			
	etail clothing sales, wholesale food sales,			
Dusiness Activities (Brief desc ex. r	etali ciotning sales, wholesale lood sales,	rental of industrial equip., computer (consulting, etc):	
Physical Address:(Street)	(City)	(State)	(Zip)	
Mailing Address:				
(Street)	(City)	(State)	(Zip)	
Felephone:(Business)	(Fax)	(Home Phone – In Case Of	Emergency)	
Email:	Website:			
Name/Phone # for Contact Person:	:	()		
Email Address for Contact Person:				
	or Officers (Attach separate sheet if r Residence Address SS	•	H o	
<u>Name</u>	Residence Address 33	N (if not publicly traded company) <u>Til</u>	<u>tle</u>	
Date Business Activity Initiated or Prop	osed in Irondale:	# of Employees in Irondale		
	me and is, to the best of my knowledge, a			
and person(s) listed.				
Date Signature		Title		
	THIS AREA FOR MUNICIPAL USE	ONLY		
ACCOUNT ID #	SETUP BY:	REVIEWED BY:		
PHYSICAL LOCATION:		/IITS & PJ GEO CODE:		
ZONING CLASSIFICATION:	BUILDING APPRO	VAL: □YES □NO □N/A □	FIRE CODE	
TAX TYPES: SALES/SELLER'S U	_		ALCOHOL	
GAS/MOTOR FUEL			LOUIDE	
_		CUPATIONAL LICENSE FEE		
TAX FILING FREQUENCY: MONTH		-	_	
BUSINESS TYPE:	. WHOLESALE BUILDING	CONTRACTOR SERVICE	PROFESSIONAL	
MANUF	ACTURER 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

- ==>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.

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

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.

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.