

TOWN OF HOLLYWOOD, ALABAMA BUSINESS APPLICATION
The Town Does Impose the Business License Tax in its Police Jurisdiction

COMPLETE FORM AND MAIL/FAX TO:
 TOWN OF HOLLYWOOD
 PO BOX 240
 HOLLYWOOD AL 35752
 (256) 259-4845 FAX: (256) 574-1679

APPLICATION TYPE

- NEW
- RENEWAL
- CONTRACTOR
- SUB CONTRACTOR
- NAME CHANGE
- OWNER CHANGE
- LOCATION CHANGE

APPLICANT: COMPLETE THIS BOX
 FEIN: _____
 ST OF AL TAX # _____
FORM OF OWNERSHIP (CHECK ONE)
 Sole Prop. ___ Prof. Assoc. ___ LLC ___
 Corp. ___ Partnership ___ Other ___

LEGAL BUSINESS NAME: _____

BUSINESS ACTIVITIES: Brief description; Type of business (include project title if contractor)

Physical Address: _____ **Mailing Address:** _____

Contact Person: _____ **Title:** _____

Phone Number: _____ **Fax:** _____

Date Business Activity Initiated or Proposed: _____ # of Employees If applicable: _____ n/a

Previous Year Gross Receipts **OR** Contractor's Gross for job \$ _____

Cost According to Schedule _____

Penalties/late fees: _____

Issuance fee: 12.00

TOTAL COST OF LICENSE:
 \$ _____

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			
PHYSICAL LOCATION:	<input type="checkbox"/> CITY	<input type="checkbox"/> POLICE JURISDICTION	LICENSE CODE _____
	<input type="checkbox"/> OUTSIDE CORP LIMITS AND PJ		SCHEDULE CODE _____
FILING FREQUENCY:	<input type="checkbox"/> MONTHLY	<input type="checkbox"/> QUARTERLY	<input type="checkbox"/> ANNUAL <input type="checkbox"/> OTHER
BUSINESS TYPE:	<input type="checkbox"/> RETAIL	<input type="checkbox"/> WHOLESALE	<input type="checkbox"/> BUILDING CONTRACTOR
	<input type="checkbox"/> SERVICE	<input type="checkbox"/> RENTAL	<input type="checkbox"/> MANUFACTURER
		<input type="checkbox"/> PROFESSIONAL	<input type="checkbox"/> OTHER