**REHOBETH BUSINESS LICENSE APPLICATION**

**(CONFIDENTIAL)**

|  |  |  |
| --- | --- | --- |
| **Complete and sent to:****Town of Rehobeth****221 Malvern Rd****Rehobeth, AL 36301****twatson@rehobethal.com****Phone (334)671-5829****Fax (334) 673-3969** | **PLEASE****Type or Print****Legibly** | **FEIN:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**State of AL Tax #: \_\_\_\_\_\_\_\_****Form of Ownership (check one)****[ ]  Sole Prop** **[ ]  Partnership****[ ]  Corporation** **[ ]  Professional Assoc.****[ ]  LLC** **[ ]  other:\_\_\_\_\_\_\_\_\_\_** |

**APPLICATION TYPE:** **[ ]  NEW BUSINESS** **[ ]  OWNER CHANGE** **[ ]  NAME CHANGE** **[ ]  LOCATION CHANGE**

**Legal Business Name:**

**Trade Name (if different from above)**

**Business Activities (Brief Description)**

**Physical Address (assigned by E-911)**

 **Street & Number City State Zip**

**Mailing Address:**

 **Street & Number OR P.O. Box City State Zip**

**Telephone:**

 **Business Fax Home Phone**

**Email:**

**Name & Phone Number of Contact Person**

**List names of Owner(s), Partner(s), or Officer(s)
 Name Title**

**Date Business Activity Initiated or Proposed in (Town)**

**This application has been examined by me, and to the best of my knowledge is a true and complete representation of the above named entity and person(s) listed.**

Date Signature Title

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**\*\*The statement below MUST be signed, dated and returned before\*\***

**\*\*Business License will be issued\*\***

**Under Penalty of perjury, I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print name), the undersigned do hereby declare that I am a United States Citizen or that I am a lawfully present alien of the United States of America.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Declarant’s Signature)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Date)**