

**CITY OF DAPHNE, ALABAMA BUSINESS TAX IDENTIFICATION APPLICATION
(CONFIDENTIAL)**

Complete and Mail

City of DAPHNE
P.O. Drawer 1047
DAPHNE, AL 36526

Phone: (251) 621-6613 Fax: (251)621-6904

TAXPAYER ID# _____

Please Print or Type
SEE REVERSE SIDE FOR INSTRUCTIONS
AND FURTHER INFORMATION

Applicant Complete This Box

FedID# _____

ST of Ala Tax # _____

Form of Ownership (Check One)

- | | |
|--|--|
| <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> Partnership |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Professional Assoc. |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Other _____ |

Date Business Activity Initiated/Proposed in DAPHNE: _____ DATE OF APPLICATION: _____

APPLICATION TYPE: NEW RENEWAL OWNER CHANGE NAME CHANGE LOCATION CHANGE

Legal Business Name: _____

Trade Name: (If different from above) _____

Anticipated Gross Revenue from start date through December 31st: \$ _____

Deliveries via common carrier (ONLY): YES NO Physical presence in Daphne (i.e. Sales/Service): YES NO

Business Activities: (Brief desc. - example. retail clothing sales, wholesale food sales, rental of industrial equip., carpentry contractor, etc.)

Physical Address: _____
(Street) (City) (State) (Zip)

Mailing Address: _____
(Street) (City) (State) (Zip)

Telephone: _____
(Business) (Cell) (Home) (Fax)

Email: _____

List Names of Owner(s), Partners, or Officers (Attach separate sheet if necessary)

<u>Name</u>	<u>Driver License #/State</u>	<u>SSN</u>	<u>Title</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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

DATE: _____ PAID: _____ CHECK/CASH _____ BY: _____ BATCH# _____

Physical Location:

- CITY/COMMERCIAL (001)
- CITY/RESIDENTIAL (003)
- PJ (N/A)
- BALDWIN CO (010)
- MOBILE CO (008)
- ALABAMA (999)
- OUT OF STATE (009)

Tax Types:

- SALES/SELLER'S USE
- CONSUMER USE
- RENTAL
- LODGINGS
- LOCAL LIQUOR
- BEER/WINE
- TOBACCO
- GAS/MOTOR FUEL

TAX FILING FREQUENCY:

- ANNUAL
- QUARTERLY
- MONTHLY
- OTHER _____

BUSINESS TYPE:

- RETAIL
- WHOLESALE
- BUILDING CONTRACTOR
- SERVICE
- PROFESSIONAL
- MANUFACTURER
- RENTAL
- NAICS CODE

APPROVAL (BIN) COMPLETE: YES NO
APPLICATION FOR HOME BUSINESS COMPLETE: YES NO

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.