

City Of Jasper
P.O. Box 1589
Jasper, AL 35502
Phone: (205) 221-8533 Fax: (205) 221-8528

APPLICATION FOR BUSINESS LICENSE RENEWAL

License Year: 2022

Business Address	OFFICE USE ONLY
	Apptype License# Date RE

AVOID PENALTY
This Application with remittance in full must be completed and returned with full payment on or before **01/31/22**.
If no longer in business, please so indicate and return the application.

Business Contact Information			Contact Person	
ACCOUNT NUMBER	TAX ID NUMBER	EVERIFY NUMBER	NAME	TITLE
PHYSICAL LOCATION			PHONE	EMAIL
Inside City Limits (Y / N):			PERSON COMPLETING APPLICATION (if different):	
PHONE	EMAIL	TITLE:	PHONE:	

Business Information	
BUSINESS START DATE:	BUSINESS DESCRIPTION
NAICS CODE	OWNERSHIP TYPE (Corp, Sole Proprietor, Partnership, LLC, Professional Assoc or Other.)
LICENSE NUMBER	RATE SCHED:

Calculation of License Fee

Gross Receipts _____	License Fee _____
Decal Fee : _____ X _____ .20 _____ (rate per decal)	Added Fee _____
<small>(Amusement/Vending, Delivery, etc)</small>	

I _____, hereby swear that the information above is true and correct and the amount of gross receipts as required for disclosure in order to obtain a business license has been examined by me and to the best of my knowledge is true, correct, and complete. I understand that the City of Jasper, or its auditors, may require proof as to the actual amount sworn to above and that the City of Jasper may require submission of books of accounts for inspection and examination.

Late Payment Penalty	_____
Interest	_____
Issuance Fee	\$12.00
TOTAL PAYMENT	_____

Signature	Title	Date
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