

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

APPLICATION FOR BUSINESS LICENSE RENEWAL

Application Date:
 License Year: 2025

Business Address		OFFICE USE ONLY	
		Apptype	License#
		RE	Date
		AVOID PENALTY	
		This Application with remittance in full must be completed and returned with full payment on or before 01/31/2025 . If no longer in business, please so indicate and return the application.	
Business Contact Information		Contact Person	
ACCOUNT NUMBER	TAX ID NUMBER	NAME	
PHYSICAL LOCATION		PHONE	email
Inside City Limits (Y / N) :		PERSON COMPLETING APPLICATION (if different):	
PHONE	EMAIL	TITLE	
Business Information			
BUSINESS START DATE:		BUSINESS DESCRIPTION	
NAICS CODE		OWNERSHIP TYPE (Corp, Sole Proprietory, Partnership,LLC, Professional Assoc or Other.)	
LICENSE NUMBER	RATE SCHED:		

Calculation of License Fee *GROSS SALES MUST BE INCLUDED*****

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

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

*****NOTE: A COPY OF OWNERS DRIVERS LICENSE MUST BE INCLUDED OR THE RENEWAL WILL BE RETURNED !!**

*** If you or your business is required by the State of Alabama to be certified by an Alabama State Board or Health Dept, please send a copy of your current certification / permit along with your renewal.***

The following is required on all renewals: tax ID number; form of ownership; legal name of business; physical location of business (cannot be a PO Box; mailing address; contact person, title and phone number; name and title of person completing application.