



Town of Jonesboro OCCUPATIONAL LICENSE APPLICATION

Directions: A separate application must be completed for each location. Each item on the application must be completed, or the application will not be accepted. If the business operates on property owned by another person or entity, proper documentation must be provided to prove permission to operate at location.

APPLICANT INFORMATION

APPLICANT NAME _____

BUSINESS NAME _____

BUSINESS ADDRESS _____

MAILING (if different) _____

APPLICANT PHONE _____ BUSINESS PH. _____

TAX ID: Federal _____ State _____ Parish _____

SOCIAL SECURITY NUMBER (if no Tax ID) _____

BUSINESS INFORMATION

Does business or owner(s) own location property? Yes No (If no, provide evidence of permission to operate.)

CHAIN/FRANCHISE: Is this business part of a chain or franchise? Yes; # in operation _____ No

TYPE OF BUSINESS (by tax table; mark all that apply):

Retail, Service, and Rentals (Table 1) Retail Gasoline (Table 1.1) Wholesale (Table 2)

Lending (Table 3) Commission/Brokerage (Table 4) Public Utility (Table 5)

Professionals/Other (Table 6); describe: _____

NEW BUSINESS: Start Date _____ Est. gross sales of first year _____

RENEWAL: If for renewal, gross sales of prev. year _____

CERTIFICATION

I, the applicant and/or the representative or agent of a business or company, herby certify under penalty of perjury, revocation of license and privilege and fines that the aforementioned is true and correct to the best of my knowledge. I authorize the Town of Jonesboro to conduct any and all public and/or private background checks necessary for the applied license.

Applicant, representative, or agent signature

Date

OFFICE USE ONLY

License Number/ID Issued _____