

Number of employees working in Gulf Shores Only:

A. Number of Full-time employees: _____ B. Number of Part-time Employees: _____

Owner(s), Partners and Officers Information (Attach separate sheet, if necessary):

Name _____ Driver's License #/State _____ Title _____

(If Incorporated) Date of Incorporation: _____ Location of Incorporation: State: _____ County: _____

Contact Person _____ **Title** _____ **Phone #** _____
Please print

Business Property(Gulf Shores only): Own Lease (If Leased, Provide Property Owner Information)

Leased Property Owner Name: _____

Address: _____

Phone: _____ Email: _____

Business Owner's Residential Address:

Name: _____

Current Address: _____

Phone: _____ Email: _____

The information provided on this application is a true and complete representation of the above-named entity and person(s) listed.

Signature: _____ **Print Name:** _____

Date: _____

_____(initial) This form is intended as a simplified, standard mechanism for businesses to initiate contact with the City of Gulf Shores concerning their activities within the 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. Contact the City of Gulf Shores for any zoning, building code and/or tax liability requirements.

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.

Internal Use Only:

Tax Liability: Sales/Seller's Use Lodging
Lease/Rental Consumer's Use Liquor Beer
Wine Tobacco Gas

Frequency: Monthly Quarterly
Occasional

Forms Mailed: _____/_____/_____

PLEASE READ THE FOLLOWING INFORMATION CONCERNING THE COMPLETION OF THIS FORM:

- Please complete all areas of the form except for the shaded areas.
 - 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 city.
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After completing this form, it can be mailed, sent by fax, or where possible, sent by electronic mail to the city.

Upon receipt of the completed form, the city will provide any additional forms and information regarding other specific requirements to you in order to complete the licensing process and collect fees due.

Please provide a copy of your certification/permit along with your application (if applicable) Food establishments must furnish a copy of their County Health Permit.

ALL BUSINESS LICENSE RENEWALS EXPIRE DECEMBER 31, ARE DUE JANUARY 1, AND DELINQUENT AFTER JANUARY 31, WITH THE EXCEPTION OF INSURANCE COMPANY LICENSES WHICH ARE DUE JANUARY 1, DELINQUENT AFTER MARCH 1.

Should there be any questions concerning the completion of this form or the licensing and/or registration process, please contact the Revenue Division at 251-968-2426.