

Taxpayer I.D. # _____

FOR BUSINESS WITH A PHYSICAL LOCATION IN GULF SHORES, APPROVAL REQUIRED FROM SOME OR ALL OF THE FOLLOWING:

- BALDWIN COUNTY ZONING DEPARTMENT PARCEL ID# _____

Signature: _____ Date: _____
Return to CITY OF GULF SHORES REVENUE DEPARTMENT

- ZONING ADMINISTRATOR: _____ Date: _____ Zoning District _____

APPROVED Yes No

Comments: _____

- BUILDING INSPECTOR: _____ Date: _____

APPROVED Yes No

- FIRE CHIEF: _____ Date: _____

APPROVED Yes No

Comments: _____

- CITY ENGINEER: _____ Date: _____

APPROVED Yes No

- POLICE CHIEF: _____ Date: _____

APPROVED Yes No

- CITY ADMINISTRATOR/CLERK: _____ Date: _____

APPROVED Yes No

- REVENUE OFFICER: _____ Date: _____

State License or Health Department approval verified? Yes No N/A