

APPLICATION

ST. CLAIR COUNTY BUSINESS LICENSE

PLEASE PRINT

COMPLETE AND RETURN FORM TO

St. Clair County Licensing Division

165 5th Ave. Suite 500

ASHVILLE, AL 35953

FAX (205-594-3567)

E-MAIL: licensingdiv@stclairco.com

FEIN or SSN # _____

TAX ID # _____

OWNERSHIP (CHECK ONE)

- | | |
|------------------------------------|--|
| <input type="checkbox"/> SOLE PROP | <input type="checkbox"/> PARTNERSHIP |
| <input type="checkbox"/> LLC | <input type="checkbox"/> PROFESSIONAL ASSOC. |
| <input type="checkbox"/> OTHER | <input type="checkbox"/> CORPORATION |

APPLICATION TYPE NEW OWNER CHANGE NAME CHANGE OTHER _____

OWNER OR MGR. NAME: _____

BUSINESS NAME: _____

TYPE OF BUSINESS (Give a Brief Description) _____

TOTAL GROSS RECEIPTS (IN STATE ONLY) Not required

PHYSICAL ADDRESS: _____ (CITY) (STATE) (ZIP)

MAILING ADDRESS: _____ (CITY) (STATE) (ZIP)

PHONE _____ FAX _____

E-MAIL ADDRESS: _____

APPLICANT COMMENTS

SECTIONS THAT MAY BE REQUIRED

- | | | | | | |
|-----------------------------|-----------------------------|------------------------------|------------------------------|------------------------------|------------------------------|
| <input type="checkbox"/> 41 | <input type="checkbox"/> 63 | <input type="checkbox"/> 83 | <input type="checkbox"/> 103 | <input type="checkbox"/> 135 | <input type="checkbox"/> 158 |
| <input type="checkbox"/> 42 | <input type="checkbox"/> 64 | <input type="checkbox"/> 84 | <input type="checkbox"/> 105 | <input type="checkbox"/> 136 | <input type="checkbox"/> 159 |
| <input type="checkbox"/> 43 | <input type="checkbox"/> 65 | <input type="checkbox"/> 85 | <input type="checkbox"/> 106 | <input type="checkbox"/> 138 | <input type="checkbox"/> 161 |
| <input type="checkbox"/> 44 | <input type="checkbox"/> 66 | <input type="checkbox"/> 86 | <input type="checkbox"/> 107 | <input type="checkbox"/> 139 | <input type="checkbox"/> 163 |
| <input type="checkbox"/> 45 | <input type="checkbox"/> 67 | <input type="checkbox"/> 87 | <input type="checkbox"/> 108 | <input type="checkbox"/> 140 | <input type="checkbox"/> 166 |
| <input type="checkbox"/> 46 | <input type="checkbox"/> 68 | <input type="checkbox"/> 88 | <input type="checkbox"/> 111 | <input type="checkbox"/> 141 | <input type="checkbox"/> 167 |
| <input type="checkbox"/> 47 | <input type="checkbox"/> 69 | <input type="checkbox"/> 89 | <input type="checkbox"/> 113 | <input type="checkbox"/> 143 | <input type="checkbox"/> 169 |
| <input type="checkbox"/> 48 | <input type="checkbox"/> 70 | <input type="checkbox"/> 90 | <input type="checkbox"/> 114 | <input type="checkbox"/> 144 | <input type="checkbox"/> 172 |
| <input type="checkbox"/> 50 | <input type="checkbox"/> 71 | <input type="checkbox"/> 91 | <input type="checkbox"/> 115 | <input type="checkbox"/> 145 | <input type="checkbox"/> 174 |
| <input type="checkbox"/> 51 | <input type="checkbox"/> 72 | <input type="checkbox"/> 92 | <input type="checkbox"/> 116 | <input type="checkbox"/> 146 | <input type="checkbox"/> 176 |
| <input type="checkbox"/> 53 | <input type="checkbox"/> 73 | <input type="checkbox"/> 93 | <input type="checkbox"/> 117 | <input type="checkbox"/> 147 | <input type="checkbox"/> 177 |
| <input type="checkbox"/> 54 | <input type="checkbox"/> 74 | <input type="checkbox"/> 94 | <input type="checkbox"/> 118 | <input type="checkbox"/> 148 | <input type="checkbox"/> 178 |
| <input type="checkbox"/> 55 | <input type="checkbox"/> 75 | <input type="checkbox"/> 96 | <input type="checkbox"/> 122 | <input type="checkbox"/> 149 | <input type="checkbox"/> 179 |
| <input type="checkbox"/> 56 | <input type="checkbox"/> 76 | <input type="checkbox"/> 97 | <input type="checkbox"/> 123 | <input type="checkbox"/> 150 | <input type="checkbox"/> 180 |
| <input type="checkbox"/> 57 | <input type="checkbox"/> 77 | <input type="checkbox"/> 98 | <input type="checkbox"/> 124 | <input type="checkbox"/> 151 | <input type="checkbox"/> 310 |
| <input type="checkbox"/> 58 | <input type="checkbox"/> 78 | <input type="checkbox"/> 99 | <input type="checkbox"/> 126 | <input type="checkbox"/> 152 | <input type="checkbox"/> 315 |
| <input type="checkbox"/> 59 | <input type="checkbox"/> 79 | <input type="checkbox"/> 99 | <input type="checkbox"/> 127 | <input type="checkbox"/> 153 | <input type="checkbox"/> |
| <input type="checkbox"/> 60 | <input type="checkbox"/> 80 | <input type="checkbox"/> 100 | <input type="checkbox"/> 131 | <input type="checkbox"/> 154 | <input type="checkbox"/> |
| <input type="checkbox"/> 61 | <input type="checkbox"/> 81 | <input type="checkbox"/> 101 | <input type="checkbox"/> 133 | <input type="checkbox"/> 156 | <input type="checkbox"/> |
| <input type="checkbox"/> 62 | <input type="checkbox"/> 82 | <input type="checkbox"/> 102 | <input type="checkbox"/> 134 | <input type="checkbox"/> 157 | <input type="checkbox"/> |

**Make Check Payable to
JUDGE OF PROBATE**

**If you mail it in add
\$2.00 to your total**