



KIM HASTIE, LICENSE COMMISSIONER, MOBILE COUNTY
 MOBILE COUNTY SALES TAX DEPARTMENT
 3925 MICHAEL BOULEVARD, SUITE F
 P.O. DRAWER 161009
 MOBILE, ALABAMA 36616
 (251) 574-4800
 FAX (251) 574-8103

THIS APPLICATION IS FOR BUSINESS LICENSE SALES TAX/ SCHOOL TAX/ LODGING TAX ACCOUNT USE TAX ACCOUNT

CHECK ONE: <input type="checkbox"/> CORPORATION <input type="checkbox"/> L.L.C. <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> PROPRIETORSHIP <input type="checkbox"/> OTHER				
NAME OF BUSINESS			BUSINESS TELEPHONE NUMBER	
BUSINESS LOCATION ADDRESS		CITY	STATE	ZIP CODE
MAILING ADDRESS		CITY	STATE	ZIP CODE
OWNERS, PARTNERS, AND/OR PRINCIPALS		REQUIRED: COPY OF OWNER OR OFFICER'S DRIVER'S LICENSE		
NAME/TITLE AND HOME ADDRESS		SOC. SEC. #	DATE OF BIRTH	DR. LIC. # HOME PHONE #
1.				
2.				
3.				
BUSINESS TYPE – CHECK APPROPRIATE BOX(ES) <input type="checkbox"/> CONTRACTOR – INDICATE TYPE OF CONTRACTOR:				
<input type="checkbox"/> BROKERAGE <input type="checkbox"/> FOOD <input type="checkbox"/> LEASE <input type="checkbox"/> LODGING <input type="checkbox"/> LOUNGE <input type="checkbox"/> RENTAL <input type="checkbox"/> VENDOR				
<input type="checkbox"/> MANUFACTURER <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> RETAIL SALES <input type="checkbox"/> SERVICE <input type="checkbox"/> WHOLESALE/SALES FOR RESALE				
<input type="checkbox"/> OTHER – DESCRIBE:				
% BUSINESS WILL DO IN RETAIL:		WHOLESALE:	VENDING MACHINE #/TYPE:	
DESCRIBE IN DETAIL BUSINESS OPERATIONS, SERVICES RENDERED AND/OR PRODUCTS SOLD:				
BUSINESS LOCATED IN <input type="checkbox"/> CITY LIMITS <input type="checkbox"/> POLICE JURISDICTION <input type="checkbox"/> COUNTY <input type="checkbox"/> OTHER				
ARE YOU GOING TO MAKE DELIVERIES IN MOBILE COUNTY OUTSIDE THE CITY LIMITS OF MOBILE OR PRICHARD? <input type="checkbox"/> YES <input type="checkbox"/> NO				
START DATE OF BUSINESS IN MOBILE COUNTY:		NO. OF EMPLOYEES	FEIN:	
I CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT MY LICENSE CAN BE REVOKED FOR ANY FALSE STATEMENTS MADE HEREIN, AND THAT I MAY BE LIABLE FOR MOBILE COUNTY SALES/USE TAX UNDER THE RESOLUTION LEVYING SUCH TAXES.				
SIGNATURE		TITLE	DATE	
OFFICE USE ONLY				
LICENSE NUMBER		CODE SECTION		
CITATION NUMBER		TAX ACCOUNT NUMBER		
FREQUENCY: <input type="checkbox"/> MONTHLY <input type="checkbox"/> USE <input type="checkbox"/> OCCASIONAL		PREPARED BY:		