

BUSINESS LICENSE & TAX APPLICATION

Application Checklist

Before completing/submitting this application

- If you have purchased or are purchasing an existing business **ALL** license renewals and/or taxes on that account must be paid in **FULL** either by previous owner or yourself before a license will be issued to you (Alabama State Law)
- If you are going to apply for a legal business name and/or structure, register your business name and structure on the
 Alabama Secretary of State Website. Note there are two (2) required parts to the process

For more information visit ... https://www.sos.alabama.gov/

- If you are going to apply for a Federal Employer Identification Number (FEIN), register your business on the Internal Revenue Service (IRS) website. <u>Note</u> for any business structure, other than Sole Proprietorship, a FEIN is required. For more information visit ... https://www.irs.gov/
- If you are going to apply for a State of Alabama Revenue tax number, register your business on the State of Alabama
 Revenue website. <u>Note</u> there could be multiple tax codes which apply to your company

For more information visit ... https://www.revenue.alabama.gov/

Required Documentation CHECKED boxes are REQUIRED

Completed - License / Tax Application

Copy - Drivers License -- for each Owner/Officer listed on application (copy must be legible)

Detailed Explanation of Business Activity

Completed - Citizenship Form .. Form A - US Citizens Form B - Non-US Citizens

Zoning Approval Certificate (city limits only) Visit ... https://www.buildmobile.org/zoning-clearance-request/Copy -

Business Structure (LLC, Corporation, etc.) Articles from Secretary of State

ALL stamped pages of the Articles included (any amendments must be provided also)

Copy - Federal Employer Identification Number (FEIN) Letter from IRS

Copy - State of Alabama Revenue Tax ID Letter

Copy - Fire Inspection Report (required - all commercial buildings/offices located in the City Limits)

Contact - Community Risk Reduction Dept - Mobile Fire & Rescue @ 251.208.7484 for more information Copy - Mobile

County Health Department (MCHD) Inspection Report - contact 251.690.8158

Copy - State of AL Certifications and/or Licenses

Copy - Surety Bond Cover Letter - contact Permitting Department @ 251.208.7602 or Permitting@cityofmobile.org

Copy - Background Check - contact Mobile Police Department Records @ 251.208.1991

Copy - Environmental Approval Letter - contact Brian Mabry @ 251.208.7793 or Mary Collier Eastburn @ 251.208.7594

Copy - Approval Letter for Convenience and Necessity - contact City of Mobile City Clerk Office @ 251.208.7411

The City of Mobile Revenue Department reserves the right to request required additional documentation and/or information from the applicant



BUSINESS LICENSE & TAX APPLICATION

Application Instructions

Read the following information concerning the completion of this application ...

- Complete all the areas of the application except for shaded area at the top of application. If it does not apply to your business, enter N/A
- Application should be typed or printed legibly
- Application should be dated and signed by an Owner, Officer or Partner of the business
- Documentation submitted must be legible or otherwise will need to be resubmitted
- It is the applicant's responsibly to submit documentation and respond to any further questions by the Revenue

 Department in a timely matter
- The application will initiate the process for registering your business with the municipality
 For physical location on the application List the business actual physical location from which they are
- operating from
- Completed application and documentation can be submitted by the following methods ...
 - Email Revenue@cityofmobile.org or back to the person who contacted you
 - Fax 251.208.7954 In Person 205 Government Street, 2nd Floor South Tower
 - U\$P\$ Mail City of Mobile Revenue Department, PO Box 3065, Mobile AL 36652-3065

With your license paperwork, you will receive (if applicable) a 60 Day Affidavit. This completed affidavit must be returned to the Revenue office within 10 days after the end of the 60 day period. This will be used to

- estimate your annual gross for the amount due for the first years license. You will receive an invoice for any amount due less the initial license amount paid.
- Failure to return the required 60 Day Affidavit will result in the following ...
 - Permanent business license will not be issued (the temporary license does have an expiration date)
 - You will be considered to be operating without a business license and subject to further penalty, interest and/or issuance of a Municipal Offense Ticket (MOT) and will have to appear in court

All license renewals are due January 1st of each year and delinquent after January 31st with the exception of the Insurance Licenses - Delinquent after March 1st

Instructions



BUSINESS LICENSE & TAX APPLICATION

City of Mobile Revenue Department PO Box 3065 Mobile AL 36652-3065 Phone 251.208.7462 / Fax 251.208.7954

Email revenue@cityofmobile.org

CLEARLY PRINT OR TYPE ALL INFORMATION

ALL BOXES ARE REQUIRED TO BE COMPLETED

	Office Use Only									
<u>Territory</u>	Zoning Req	Account #	NAICS Code(s) As	ssigned	Bill 1	Number(s)		<u>Amount Due</u>		Completed By
	Yes									
	No									
Business	Information									
Application Date Start Date of Business Dr. Business Or					<u>Operat</u>	ed From				
Comm				nercial Store Front/Office Home/Home Office						
Application	ı Type									
New	Business		Change - No	ew Owner	Change - Physical Location				Re-Active Account	
Chan	ge - Business	Name	Change - FI	EIN/Struct						
If New Own	ner, List Previou	s Business & Owne	r Name		C. P.			<u>Purcha</u>	se Date of Business	
If Location	Change, Previou	s Physical Address	(Street Address an	d Zip)				New Lo	ocation - Date Relocated	
Description	n/Type									
Conti	ractor - State	Certified	Construction - l	Non-Certifi	ied	Retail		Manufacturer		Wholesale
Servi	ce / Profession	onal	Rental - Tangib	le Goods		Peddler		Food Truck		Other
			See page 3 for add		estion					
Resta	aurant/Bar/L		Convenience/G			Hotel/N		Rental - Resi	dential	k
		siness Description	'Activity	-		, , , , , , , , , , , , , , , , , , ,				
	•	• ,								
Structure										
Sole Proprietorship Limited Liability Company (LLC)				Corporation Professional Association Other (specify)						
Federal Tax	<u>k ID (FEIN) - IRS</u>		State of AL Tax II	<u>Number</u>	Physical Location of the Business					
				City Limits Police Jurisdiction (PJ) Outside both City & PJ						
Legal Business Name			Trade Name (DBA - Doing Business As)							
Company Physical Address (Street Address, Suite #)				<u>City</u>			<u>State</u>	Zip Cod	<u>de</u>	
Mailing Address (Street Address, Suite #, PO Box)					<u>City</u> <u>State</u>		<u>State</u>	Zip Coo	<u>de</u>	
<u>Company - Phone Number</u> <u>Business - Phone Number</u>		Number	# of Employees							
Business Co	ontact Person In	<u>formation</u>					•			
<u>Name</u>			<u>Title</u>			<u>Phone</u>		<u>Email</u>		

City of Mobile Business License & Tax Application

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	mation Continued							
Business Tax Typ								
Sales Tax	Sellers Use	Consum	, ()			perty)		
Lodging	Lodging Wine Tax Tobacco Tax				ase Tax			
Tax Filing Freque	ncy (must match State of A	AL filing frequenc	<u>y)</u>					
Monthly	Quarterly	Semi-Ar	nually	Annually				
Land/Building In	nformation (Complete or	nly if the busine	ss physical location	on is located insid	le the city limits	or police jurisd	iction)	
Do you own or i	rent/lease the property	? Own	Rent/Lease					
Property Owner N	<u>Vame</u>		Prop Owner Ph	none Number Property Owner Email				
Property Owner A	Address		l	Property Own	er City	<u>State</u>	Zip Code	
Owner(s), Offic	cers or Partners (atta	ch a separate s	sheet if necessa	ry) *Copy o	f Drivers Lice	ıse must be pr	l ovided*	
	ast, First, Middle, Suffix)	•		<u>Title</u>				
Date of Birth	Social Security #	Duirrana Liaa	nse (State & #)	Contact Numb	on	Email		
Date of Birtii	Social Security #	Drivers Lice	iise (state & #)	Contact Numb	<u>er</u>	Elliali		
							I = 0 1	
Home Street Addi	<u>cess</u>			<u>City</u>		<u>State</u>	Zip Code	
2. Full Name (La	st, First, Middle, Suffix)			<u>Title</u>				
Date of Birth	Social Security #	Drivers Lice	nse (State & #)	Contact Numb	<u>er</u>	Email		
Home Street Addi	racc			City		<u>State</u>	Zip Code	
Home Street Addi				City		State	<u>zip couc</u>	
-	son(s) listed above, own o d address (use additional			ated in the city lim	its and/or police	jurisdiction? If y	es, list owner/officer name,	
business name an	u address tuse additional	space on next pa	<u>267</u>					
Yes No								
Certification a								
	he following about the	_		-0.1	. 1	70.1 00.1		
• The license may require a 60 Day Affidavit. The affidavit will be due 70 days from start date of business. If the affidavit is not returned and/or money due for license is not paid You are operating without a license								
• ALL license expire on December 31st of each year (does not matter when purchased thru out year). Renewals MUST be paid by January 31st (to								
avoid additional penalties and interest until paid)								
• Operating a business without a business license the company and/or owner is subject to penalties, interest, Municipal Offense Ticket (MOT) and court appearance and fees								
By signing this application, you certify that all information and statements provided herein are true and correct. You also certify,								
under penalty of perjury, that you are a US Citizen or lawfully present in the US. In addition, by signing below, you acknowledge and								
understand that you cannot operate this business in the City of Mobile an/or its Police Jurisdiction until this business license application is approved and a business license issued.								
Printed Name &	Signature of Ov	wner/Applicant			Date Signed			
	<u>, p</u>			. , <u> </u>				
Printed Name &	<u> Fitle - Person Completing</u>	Арр	Signature of Pe	erson Completing	<u>Application</u>		<u>Date Signed</u>	

City of Mobile Business License & Tax Application

Business Information Continued							
Rental - Residential (list the address of the rental properties located within the City Limits & Police Jurisdiction) - use additional sheet if necessary							
Yes N	o Do you have a management company for the properties? If yes, company name & contact information						
Restaurant/	Bar/Lounge* Alcohol Sales require an additional application & City Council approval						
Yes N	lo *If alcohol sales Has the application process with the state ABC Board, City of Mobile, Mobile County Commission been started?						
Yes N	Will the location have vending and/or gaming machines? Pool tables? If yes, # of machines and/or tables (if both, # for each)						
Yes N	No Will the location cook/serve prepared food?						
Convenience/	Grocery Store*						
Yes N	*If alcohol sales Has the application process with the state ABC Board, City of Mobile, Mobile County Commission been started?						
Yes N	Will the location cook/serve prepared food?						
Yes N	Io Will the location sell gasoline? Owner of pumps? Applicant Other						
	Gasoline distributor name & contact information						
Hotel/Motel*							
	Number of rooms available for customer rental						
Yes N	Will the location have retail sales at front counter and/or vending machines? If yes, # of machines						
Yes N	No *If alcohol sales Has the application process with the state ABC Board, City of Mobile, Mobile County Commission been started?						
Yes N	Will the location cook/serve prepared food?						
	person(s) listed on application page 2 own or member of any other business located in the city limits and/or police jurisdiction? If yes, list						
owner/officer	name, business name and address						

FORM A

Name:		
Busine	ss Name:	
Busine	ss Location and Tax ID No.:	
For	Official Use Only	FORM A
Citi	zenship status confirmed by	Date
	Proof of Citizenshi	p Demonstration and Declaration
conduc citizens	t a public records transaction with the City of Mobil	sole proprietor or a partner in a partnership, who is a U.S. Citizen to le, Alabama, each such individual/citizen must declare his or her U.S. is form, and must demonstrate his or her U.S. citizenship by presenting a
	If the presented item does not show the person's cur he legal name change.	rent legal name, please also provide a copy of supporting document to
Please	check which of the listed items has been provided.	
	governmental agency of another state within the United States requires proof of lawful presence non-driver's identification card. A birth certificate indicating birth in the United States requires person's United States passport. United States naturalization documents or the num Other documents or methods of proof of United States united States naturalization documents or the num Other documents or methods of proof of United States united and Nationality Act of 1952, as amer Bureau of Indian Affairs card number, tribal treaty A consular report of birth abroad of a citizen of the A certificate of citizenship issued by the United States actification of report of birth issued by the United State A certification decree showing the person's name An official United States military record of service An extract from a United States hospital record of the United States. AL-verify. A valid Uniformed Services Privileges and Identification that the Alabama promulgated pursuant to the Alabama Administration.	It passport identifying the person and the person's passport number or the other of the certificate of naturalization. It tates citizenship issued by the federal government pursuant to the nded. It is card number, or tribal enrollment number. It is United States of America. It it is Citizenship and Immigration Services. It it is Department of State. It, issued by the United States Department of Homeland Security. It is and United States birthplace. It is showing the applicant's place of birth in the United States. If birth created at the time of the person's birth indicating the place of birth in
	CITIZEN	ISHIP DECLARATION
	Under penalty of perjury, I, the undersigned do hereby declare that I am a cit Date	, (print name of undersigned) tizen of the United States of America.
		Declarant's Signature

FORM B

Name	e:		
Busine	ess:		
Busin	ess Location and Tax ID No.:		
For	Official Use Only	FORM B	
Pres	umptive alien status confirmed by	Date	
SAV	E Verification received by	Date	
	Verification, Demonstration and De	claration of Lawfully Present Alien	
r h	SAVE Verification. In order for an individual, include partnership, who is a lawfully present alien to conduct a ne/she must be verified, using the Systematic Alien Versuch alien is lawfully present in the United States.	public records transaction with the City of Mobile, Ala	bama,
	In order to obtain such verification, each such alien must sas follows:		
r r	Presumptive Lawful Presence. In order for an individual partner in a partnership, who is a lawfully present alien bending final verification, each such alien must declare declaration at the bottom of this form, and must demorphy of the following items.	to conduct a public records transaction on a temporary that he or she is a lawfully present alien, by executing	basis
	if the presented item does not show the person's current to verify the legal name change.	t legal name, please also provide a copy of supporting	
Please	e check which of the listed items has been provided.		
	 identifier). Any valid United States federal or state government other biometric identifier, if issued by an entity that resissuance). A foreign passport with an unexpired United State United States Department of Homeland Security indicates 	t issued identification (bearing a photograph or other bioment issued identification document (bearing a photograph equires proof of lawful presence in the United States bearing the bearer's admission to the United States). (with the corresponding entry stamp and unexpired du	ph or fore
	DECLARATION OF LAW	FULLY PRESENT ALIEN	
	Under penalty of perjury, I, the undersigned do hereby declare that I am a lawfully pr		
	Date	Declarant's Signature	