

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. <u>Note</u> 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

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/

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

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

Federal Employer Identification Number (FEIN) Letter from IRS

State of Alabama Revenue Tax ID Letter

Lease/Rental Agreement (required - all leased properties)

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

Contact - Community Risk Reduction Division - Mobile Fire & Rescue @ 251.208.7484

Mobile County Health Department (MCHD) Inspection Report - contact 251.690.8158

State of AL Certifications and/or Licenses

Surety Bond Cover Letter - contact Permitting Department @ 251.208.7603 or Permitting@cityofmobile.org

Background Check - contact Mobile Police Department Records @ 251.208.1991

Environmental Approval Letter - contact Ryne Smith @ 251.208.7529 or Ryne.Smith@cityofmobile.org

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



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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

Internal 0	ffice Use Only	7								
<u>Territory</u>	Zoning Req	Account #	NAICS Code(s) As	ssigned	Bill	Number(s)		<u>Amount Due</u>		Completed By
	Yes									
	No									
Business	Information									
Application	<u>Date</u>	Start Date of Bu	<u>siness</u>	Business	Operat	ed From				
				Comm	ercial	Store Front/	'Office	Home/Home	Office	
Application	<u>Type</u>									
New l	Business		Change - N	ew Owner		Change	- Physic	al Location		Re-Active Account
Chang	ge - Business	Name	Change - Fl	EIN/Struct						
		s Business & Owne		•					<u>Purcha</u>	ase Date of Business
If Location (Change, Previou	ıs Physical Address	(Street Address an	d Zip)					New L	ocation - Date Relocated
Description	/Type									
Contr	actor - State	Certified	Construction -	Non-Certif	ied	Retail		Manufacturer		Wholesale
Servi	ce / Professi	onal	Rental - Tangib	le Goods		Peddler	•	Food Truck		Other
	,		See page 3 for ad		estion	s pertaining t	to your b	usiness		
Resta	urant/Bar/L	ounge*	Convenience/G	rocery Sto	re*	Hotel/N	Motel*	Rental - Resi	idential ^a	*
Detailed Ex	planation of Bus	siness Description,	'Activity			•				
<u>Structure</u>										
	Proprietorsh	in Limited	Liability Compar	ny (LLC)	Corr	ooration	Profes	ssional Associa	tion	Other (specify)
	ID (FEIN) - IRS		State of AL Tax II			sical Location of				other (specify)
reuerar rax	<u>. ID (FEIN) - INS</u>		State of AL Tax II	<u> Number</u>		City Limits		: Jurisdiction (P	J) O	outside both City & PJ
Legal Busin	ess Name				Trac	de Name (DBA -	Doing Bus	iness As)		
Company Physical Address (Street Address, Suite #)				City	•		<u>State</u>	Zip Co	<u>de</u>	
Mailing Address (Street Address, Suite #, PO Box)			City			<u>State</u>	Zip Co	<u>de</u>		
Company - 1	Phone Number		Business - Phone	Number	# of	Employees				
Business Co	ntact Person In	<u>formation</u>				•				
<u>Name</u>			<u>Title</u>			<u>Phone</u>		<u>Email</u>		
		No.			_	***		And the second s		

City of Mobile Business License & Tax Application

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Business Inform	mation Continued						
Business Tax Type	<u>e</u>						
Sales Tax	Sellers Use	er Use	Lease/Rental (tangible Property)				
Lodging Wine Tax Tobacco Tax			Tax	Liquor Purch	ase Tax		
Tax Filing Freque	ncy (must match State of A	AL filing frequenc	<u>v)</u>				
Monthly	Quarterly	Semi-Ar	inually	Annually			
Land/Building Ir	nformation (Complete or	nly if the busine	ss physical locatio	on is located insid	de the city limits	or police jurisd	iction)
Do you own or r	ent/lease the property	? Own	Rent/Lease				
Property Owner N	lame		Prop Owner Ph	Owner Phone Number Property Owner Email			
Property Owner A	ddress			Property Own	er City	<u>State</u>	Zip Code
Owner(s), Office	ers or Partners (atta	ch a separate s	sheet if necessa	ry) *Copy o	f Drivers Lice	ise must be pr	ı ovided*
	st, First, Middle, Suffix)	-		<u>Title</u>		-	
Data of Birth	Canial Canada #	Duissana Lina	and (Chaha () H)	Cantast Numb		E	
Date of Birth	Social Security #	Drivers Lice.	nse (State & #)	Contact Numb	<u>er</u>	<u>Email</u>	
							T =
Home Street Addr	<u>'ess</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>	<u>Email</u>	
Home Street Addr	ess			City		<u>State</u>	Zip Code
1101110 00 0001111111	<u> </u>			<u> </u>		<u>State</u>	<u>np dede</u>
Do any of the person(s) listed above, 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 (use additional space on next page)							
business name and address (use additional space on next page)							
Yes No							
Certification and Signature							
I understand the following about the license being applied for							
• 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)							
• 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 & 1	itle of Applicant		Signature of O	wner/Applicant			Date Signed
Printed Name & 7	Title - Person Completing	Ann	Signature of Po	erson Completing	Annlication		Date Signed
Timiled Ivallie & I	ine - i erson completing	<u>, ,hh</u>	<u> Jignature or Fe</u>	vianu combienilă	, ppiicatioi i		<u>Date Signed</u>
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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 No Do you have a management company for the properties? If yes, company name & contact information						
Restaurant/Bar/Lounge* Alcohol Sales require an additional application of	& City Council approval					
Yes No *If alcohol sales Has the application process with the state ABC Board, City of Mobi	e, Mobile County Commission been started?					
Yes No Will the location have vending and/or gaming machines? Pool tables? If yes, # of mac	hines and/or tables (if both, # for each)					
Yes No Will the location cook/serve prepared food?						
Convenience/Grocery Store*						
Yes No *If alcohol sales Has the application process with the state ABC Board, City of Mobil	e, Mobile County Commission been started?					
Yes No Will the location cook/serve prepared food?						
Yes No Will the location sell gasoline? Owner of pumps? Applicant Other	or .					
Gasoline distributor name & contact information						
Hotel/Motel*						
Number of rooms available for customer rental						
Yes No Will the location have retail sales at front counter and/or vending machines? If yes, #	t of machines					
Yes No *If alcohol sales Has the application process with the state ABC Board, City of Mobi	le, Mobile County Commission been started?					
Yes No Will the location cook/serve prepared food?						
Do any of the person(s) listed on application page 2 own or member of any other business located in the city limit owner/officer name, business name and address	ts and/or police jurisdiction? If yes, list					
STREET HAIRE, DUSINESS HAIRE AND AUGUSS						

FORM A

Name:	:	
Busine	ess Name:	
Busine	ess Location and Tax ID No.:	
For	Official Use Only	FORM A
Citiz	zenship status confirmed by	Date
	Proof of Citizenship	Demonstration and Declaration
conduc citizens	t a public records transaction with the City of Mobile,	ole proprietor or a partner in a partnership, who is a U.S. Citizen to Alabama, each such individual/citizen must declare his or her U.S. form, and must demonstrate his or her U.S. citizenship by presenting a
	If the presented item does not show the person's curre the legal name change.	nt legal name, please also provide a copy of supporting document to
Please o	check which of the listed items has been provided.	
	governmental agency of another state within the Un	issued by the Alabama Department of Public Safety or the equivalent ited States, provided that the governmental agency of another state within n the United States as a condition of issuance of the driver's license or
	A birth certificate indicating birth in the United Stat	es or one of its territories. cassport identifying the person and the person's passport number or the
	Immigration and Nationality Act of 1952, as amende	tes citizenship issued by the federal government pursuant to the ed.
	Bureau of Indian Affairs card number, tribal treaty of A consular report of birth abroad of a citizen of the A certificate of citizenship issued by the United State	United States of America.
	Final adoption decree showing the person's name an	ssued by the United States Department of Homeland Security. d United States birthplace.
		showing the applicant's place of birth in the United States. irth created at the time of the person's birth indicating the place of birth in
0	promulgated pursuant to the Alabama Administrativ	ation Card. Department of Revenue authorizes, through an administrative rule we Procedure Act, to be used to demonstrate or confirm a person's United states, provided that the identification requires proof of lawful presence in
	CITIZENS	HIP DECLARATION
	Under penalty of perjury, I, the undersigned do hereby declare that I am a citiz	, (print name of undersigned) en of the United States of America.
	Date	
		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	