

2022 BUSINESS LICENSE APPLICATION

TOWN OF DAUPHIN ISLAND

1011 BIENVILLE BLVD.

DAUPHIN ISLAND, AL 36528

P 251-861-5525

F 251-861-2154

ID #: _____

Date: _____

Name of Business: _____

Name of Owner: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Physical Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email: _____

Nature of Business (Be Specific): _____

- | BUSINESS TYPE: | ORGANIZATION TYPE: | PHYSICAL LOCATION: |
|---|--|---|
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Corporation | <input type="checkbox"/> Outside Dauphin Island City Limits |
| <input type="checkbox"/> Wholesale Sales | <input type="checkbox"/> Partnership | <input type="checkbox"/> Inside Dauphin Island City Limits |
| <input type="checkbox"/> Retail Sales | <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> Is business operated from home |
| <input type="checkbox"/> Wholesale/Retail | <input type="checkbox"/> Professional Assoc. | |
| <input type="checkbox"/> Contractor | <input type="checkbox"/> Other | |
| <input type="checkbox"/> Other | | |

Federal Tax ID or Social Security Number: _____

Alabama State Sales & Use Tax Number: _____

State License Number: _____

Master Certification Number: _____

By signing this application, I under the penalties of perjury, declare that I am the owner or authorized representative of business listed above and that the gross receipts from said business during the prior year on Dauphin Island were \$_____, and that this declaration is made for the purpose of determining the amount of license fee tax to be paid by said business to the Town of Dauphin Island for the current year; 2) shall comply with all federal, state and local laws and regulations; and that 3) all information contained in this application is true and complete.

Signature of Owner/Authorized Representative