

BUSINESS LICENSE / TAX APPLICATION (PAGE 2)**LICENSING / APPLICABLE TAXES****Business Operated From:** HOME STORE FRONT OR OFFICE**Physical Location:** CITY OUTSIDE CITY LIMITS**Tax Types:**

- | | | |
|--|--|---|
| <input type="checkbox"/> SALES TAX | <input type="checkbox"/> BUSINESS LICENSE (ANNUAL) | <input type="checkbox"/> SELLER'S USE TAX |
| <input type="checkbox"/> LODGING TAX | <input type="checkbox"/> RENTAL TANGIBLE PERSONAL PROPERTY TAX | <input type="checkbox"/> CONSUMER'S USE TAX |
| <input type="checkbox"/> LODGING TAX - STR | <input type="checkbox"/> RENTING/LEASING COMMERCIAL PROPERTY | <input type="checkbox"/> TOBACCO TAX |
| | <input type="checkbox"/> RENTING RESIDENTIAL PROPERTY | <input type="checkbox"/> WINE TAX |

Tax Filing Frequency (must match your State of AL filing frequency):

-
- MONTHLY
-
- QUARTERLY
-
- ANNUALLY
-
- SEMI-ANNUALLY
-
- OTHER

Business Type:**NAICS Code:****# of Employees:**

- | | | | |
|---------------------------------------|--|-------------------------------------|---|
| <input type="checkbox"/> RETAIL | <input type="checkbox"/> WHOLESALE | <input type="checkbox"/> CONTRACTOR | <input type="checkbox"/> SERVICE / PROFESSIONAL |
| <input type="checkbox"/> MANUFACTURER | <input type="checkbox"/> RENTAL / RENTAL PROPERTY / SHORT-TERM RENTALS | <input type="checkbox"/> OTHER | |

Estimated Gross Receipts:**Start Date:****CERTIFICATION AND SIGNATURE**

By signing this license 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 are lawfully present in the US. In addition, by signing below, you acknowledge that you cannot operate this business in the City of Oxford or its Police Jurisdiction until this business license application is approved and a business license is issued.

Signature of Owner/Applicant:**Date:****Printed Name:****Title:****APPLICATION REVIEW (OFFICE USE ONLY)**

Zoning Compliance #

Account #

Application Reviewed By:

Date Reviewed:

Inspection Required:

Date Reviewed:

Inspection Approval:

Fire Code:

Business License #

Business License Issued By:

State License Verification By: