CITY OF CLAY, ALABAMA

Send Completed Form To:

City of Clay P.O. Box 345 Clay, AL 35048 205-680-1223 (Phone) 205-681-6266 (Fax) www.clayalabama.org aself@clayalabama.org

Reviewed By: __



Applicant Complete This Box:		
Federal Tax ID #: _		
NAICS Code:		
Form of Ownership (Circle One) Sole Proprietor Partnership		
Corporation	Professional Assoc	
LLC	Other:	
■ Location Change		

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Application Type:	☐ Location Change
Trade Name (if different from above):	
Brief Description of Business Activities in Clay:	
Physical Address:	
Mailing Address:	
Business Phone: Fax: Ema	il:
Contact Person:Estimated Gross R	Receipts:
Date Business Activity Initiated or Proposed in Clay:	
If your company has <u>no physical presence</u> in Clay and <u>only delivers</u> into Clay via <u>own</u> company's <u>gross receipts are under \$75,000.00</u> , you may elect to purchase a DELIVERY the amount of \$100.00. If you qualify for this option and wish to exercise it, please chec	License pursuant to State and City Code in
Please submit copies of all current professional cards, applicable licenses, a Business license may not be issued without these documents on file.	and a state issued photo ID.
By signing this document I attest that the information provided in this docume owner or officer of the business authorized to sign documents for said business perjury, that I am a United States Citizen or that I am a lawfully present Alien Signature:	ss and hereby declare, under penalty of
Printed Name:	Date:
Card Number:Exp:	/ CVV Code:
Cardholder Name: Signature:	,
Billing Address and Zip:	
FOR MUNICIPAL USE ONLY	
Business License # Physical Location: City Zoning Classification: Building Approval: Y	Other Penalty & Int: N NA Issue Fee: \$12.00

Notes: __

Issue Fee: \$12.00

Total Due: _