CITY OF SHEFFIELD, ALABAMA BUSINESS APPLICATION

(CONFIDENTIAL)

Complete & Mail to: City of Sheffield P.O. Box 380

NAICS Codes:		

business license. See page 2 fo	any necessary changes. Fa	•	e & sign will result in a delay in issuing NAME CHANGE LOCATION CHAN
Business Name:		DBA	
City, St, Zip:			
Physical Address if difference ysical Address: City,St,Zip:	_	Sheffield Do You own	businesses only: or rent this property? who is the owner?
Business Activities: (ex: Retail Clothin	g. Wholesale Food, Rental of Inc	dustrial Equipment	Computer Consulting etc.)
CONTACTS: Busine Busire			
CONTACTS: Busine Busire E-Mail: Link to Your Website:	ss Phone:	Phone: Nam	If located in Sheffield: Please provide a responsible party to be called in case of emergency at the business location after hours. This information will be made available to the Police Department.
CONTACTS: Busine Busir	ss Phone: ness Fax: n: Contact Person's P	Phone:	If located in Sheffield: Please provide a responsible party to be called in case of emergency at the business location after hours. This information will be made available to the Police Department.

Date:Sig	nature:	Title: