

CITY OF GAINESVILLE, GEORGIA
REGULATORY LICENSE
APPLICATION

FOR OFFICE USE ONLY:

ACCOUNT #: _____ **SIC CODE:** _____ **RATE CODE:** _____

1. **BUSINESS NAME:** _____

2. **LOCATION:** _____

3. **MAILING ADDRESS:** _____

CITY/STATE/ZIP CODE: _____

4. **TYPE OF OWNERSHIP:** _____ **SOLE OWNERSHIP**
 _____ **PARTNERSHIP**
 _____ **GEORGIA CORPORATION**
 _____ **OTHER STATE CORPORATION**

5. **CORPORATE NAME AND ADDRESS [IF DIFFERENT FROM *ITEM 1*]:**

6. **AGENT/REPRESENTATIVE FOR BUSINESS AFFAIRS IN THE CITY:**
_____ **PHONE:** _____

7. **OWNER(S): NAME:** _____

ADDRESS: _____

NAME: _____

ADDRESS: _____

NAME: _____

ADDRESS: _____

8. **DOMINANT LINE OF BUSINESS:** _____

9. **FEDERAL EMPLOYER ID # OR SOCIAL SECURITY #:** _____

