

BUSINESS REGISTRATION FORM

1. Name of business and operation

2. Street and address of business / Phone numbers / Block and Lot

Premises Phone:

Premises FAX:

Block and Lot:

3. Lists all buildings and their uses in detail on this property
(all buildings must be listed separately)

Examples: Retail store - sell footwear and purses

Storage building - store tools, maint. equip. and office supplies

A. _____

B. _____

C. _____

4. Name, address and phone number of person who owns business (applicant)

Phone:

5. Name, address and phone number of building owner (if different from above)

Phone:

5. Name, address and phone number of person(s) responsible for maintenance.

Phone: _____

7. Names and phone numbers of 3 people to contact in case of Emergency.

#1 _____

Phone: _____

#2 _____

Phone: _____

#3 _____

Phone: _____

8. Number of stories

9. Building dimensions and floor area(s).

10. Construction (if truss construction present, state Floor/Roof too).

I certify that all statements made by me in this registration form are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signature of Affiant

Date

Printed name of Affiant

Address of Affiant

LOCAL: _____ STATE: _____ DATE RECVD: _____

NAME: _____