

BUSINESS LICENSE APPLICATION

City of Watkinsville

Applicant: _____ Home Phone #: _____
 Cell Phone #: _____
 Address: _____
 Partner: _____ Home Phone #: _____
 Cell Phone #: _____
 Corporation: _____ (Use back of sheet to list corporation officers)

Name of Business: _____
 Location: _____ Business Phone #: _____
 Nature of Business: _____
 (Attach a copy of state license if required to be licensed by the State)
 Number of Employees: _____ E-Mail: _____
 Mailing Address: _____

List all convictions of any laws or ordinances of the City, State, or Federal Government which are either felonies or are misdemeanors involving moral turpitude (dishonesty).

I hereby certify under oath that the information contained herein is correct to the best of my knowledge.

Sworn to and subscribed before the _____
 Undersigned notary public on _____ Applicant's Signature
 _____, 20____

 Affix Notary Seal _____ Date

Official Use Only: *See worksheet for fee amounts*

_____	+	_____	X	_____	+	\$25.00	=	_____
Flat Amt		# of Employee		Emp. Fee		Admin Fee		Total Amt. Due

CHECK #: _____ CASH R#: _____

Sign Application: Given Not Needed Applied for & Paid
 Affidavit of Citizenship Notarized and Received

"Watkinsville, The Artland of Georgia"
**DEADLINE TO BE ON CURRENT MONTH'S AGENDA IS THE FIRST WEDNESDAY OF THE
 MONTH BY 12 NOON**