



CITY OF TUTTLE BUSINESS OCCUPANCY LICENSE

PERMIT # _____

Fee: \$35.00

APPLICANT INFORMATION

Name:			Date:
Address:	City:	State:	Zip:
Date of Birth:	Phone 1:	Phone 2:	
Applicant's Signature:			

BUSINESS INFORMATION

Business Name:	Business Phone:
Address:	Type of Business:
Owner of Building:	Phone:
Seasonal or Temporary? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, give dates of operation.
Sales Tax ID #	EIN (or SS)#

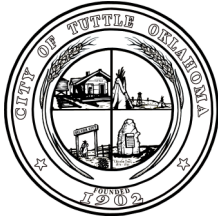
ALARM / BUSINESS IDENTIFICATION PROGRAM

Number of Employees:	Typical Operating Hours & Days:
Are there hazardous chemicals stored on the premises?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please list:	
Does your business have an alarm? (If yes, the below information must be completed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Alarm Company Name:	State License #
Alarm Company Telephone Number: ()	
Type/Coverage of Alarm:	

(Example : Burglar, Motion Sensors, Fire, Smoke Detector)

Emergency Contacts

Name	Home Phone	Office Phone	Other
1.			
2.			
3.			



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OFFICE USE ONLY**Public Utilities**

Signature: _____ _____ Approve _____ Deny Date: _____

Available: Water Sewer **Remarks:****Building Inspections**

Signature: _____ _____ Approve _____ Deny Date: _____

Remarks:**Planning**

Zoning: _____

Signature: _____ _____ Approve _____ Deny Date: _____

Remarks: