

Business License Application

Application Type: _____

Ownership Type: _____

Business Type: _____

Avenu Account No.: _____

NAICS: _____ www.naics.com/search/

Online Filing is Available
Free-Fast-Secure-Step by Step
<https://rds.bizlicenseonline.com>

All Fields Must Be Completed

Note: This is a PDF fillable form.
To get a free Adobe Reader,
[click here](#)

Municipality Name: _____
Dates--Due: _____ Delinquent: _____

Current Year (License Year): _____

Purchasing different license year, indicate year: _____

Date Business Activity Initiated/Proposed: _____

Instructions:

- All municipalities are required to obtain a copy of individual/entities board certifications/permits prior to issuance of a business license. For a list of certifications, please visit our website [here](#).
- To determine license fee due see a full schedule listing at www.avenuinsights.com or email our Business License Department at businesslicensesupport@avenuinsights.com with any questions or call 800-556-7274. Fax documentation toll free to 844-528-6529.

Federal Employer Identification No. (FEIN): _____ Social Security No.: _____ Number of Employees: _____

Describe Business Conducted: _____

Legal Business Name: _____

(If different from legal name)

Trade Name / DBA: _____ Email: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

(No PO Box Allowed)

Telephone Numbers: Business: _____ Home: _____ Cell: _____ Fax: _____

Contact Person Name: _____ Phone: _____ Title: _____

List Names of Owner(s), Partner(s), or Officer(s)-Attach Separate Sheet if Necessary:

Name: _____ Residence Address: _____ SSN: _____ Title: _____

Police Jurisdiction Definition: The area outside of the incorporated municipality limits as defined by local ordinance. Businesses physically located in the police jurisdiction are subject to purchase a business license per the municipality's ordinance at one-half the normal rate, if applicable. Please check the box if you are in the police jurisdiction but not in the incorporated city limit.

Column A	Column B	Column C	Column D	Column E	Column F	Column G
Report all types of business conducted		Units Required if Fee is based upon a "number" of units ie. days, machines, etc.		Add Column E & F. Enter Total in Column G and then add down for Total Due.		
Schedule No. #/ Code	Type of License	Gross Receipts	Unit Amount	Flat/Base Fee	Additional Amount Due Based on Calculation	License Fee Due
						\$
						\$
						\$
Penalty Information:						
Calculate Penalty (if applicable):						\$
Calculate Interest (if applicable):						\$
Issuance Fee:						\$
Total Due:						\$

Make Check Payable To: Tax Trust Account Mail To: Avenu Business License Dept. PO Box 830900 Birmingham, Alabama 35283-0900

Sworn Statement: I hereby swear that the amount of capital invested or value of goods, stocks, furniture and fixtures or amount of sales or receipts as required for disclosure in order to obtain a business license has been examined by me and to the best of my knowledge is true, correct, and complete. I understand issuance of license does not permit business operation unless business is properly zoned, and/or in compliance with all applicable laws/rules.

Signature: _____ Date: _____ Telephone No.: _____

Print Name: _____ Title: _____

Email: _____

Returned Check Disclaimer: Effective July 1, 2010, each returned item received by Avenu due to insufficient funds will be electronically represented to the presenters' bank no more than two times in an effort to obtain payment. Avenu is not responsible for any additional bank fees that will accrue due to the resubmission of the returned item. Please see the full returned check policy at www.avenuinsights.com.