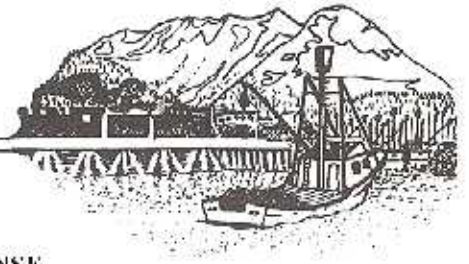


CITY OF CORDOVA



APPLICATION FOR CITY BUSINESS LICENSE

License Fee \$35.00 _____ Additional \$25.00 _____
(Second License)

RENEWAL # _____ NEW BUSINESS START DATE (if new) _____

BUSINESS NAME: _____

MAILING ADDRESS: _____

STREET ADDRESS: _____

CITY _____ STATE _____ ZIP _____

FEDERAL ID# _____ SSN# _____

STATE LICENSE # _____

TYPE OF OWNERSHIP: SOLE PROPRIETOR PARTNERSHIP CORPORATION

DESCRIPTION OF BUSINESS: _____

NAME & ADDRESS OF OWNER(S), GENERAL PARTNERS, OR CORPORATE OFFICERS:

NAME _____ TITLE _____
ADDRESS _____
PHONE NO. _____

NAME _____ TITLE _____
ADDRESS _____
PHONE NO. _____

.....
I declare, under penalty of making a false statement, that to the best of my knowledge and belief,
the information provided is true.

SIGNATURE _____ TITLE _____
NAME PRINTED _____ DATE _____

.....
AUDIT: Is business location consistent with ZONING regulations? YES _____ NO _____

Application Approved _____ OR Application Denied _____

Reason for denial: _____
