

ANSWER ALL QUESTIONS COMPLETELY AND REMIT PROPER PAYMENT DUE

Incomplete Applications Will Be Returned To You

* * * READ CAREFULLY * * *

CITY OF CLIFTON City Hall APPLICATION FOR BUSINESS TAX LICENSE	FOR DEPARTMENT USE ONLY Date Received: _____ Date Written: _____ License No.: _____ Classification: _____
--	---

1. Opening Date of Business at This Location: _____

2. Exact Business Name and Location Name (give trade name at this location) _____ Street, Highway (Do not use P.O. Box) _____ City _____ State _____ Zip _____	3. Business Mailing Address Name (enter corporate if applicable) _____ Street, Highway, Route or P.O. Box Number _____ City _____ State _____ Zip _____
---	--

4. Business Phone Number (INCLUDE AREA CODE) area code _____ _____ _____	5. Federal Employers I.D. No. _____ <input type="checkbox"/> Applied For <input type="checkbox"/> Not Required
--	--

6. State Sales Tax Number _____
 Applied For Not Required

7. Type of Ownership: Proprietorship Partnership Other:
 Corporation — Enter date of incorporation or domestication in Tennessee: _____
 Name of corporation: _____

8. Identify owners, officers and/or partners (attach additional names, addresses, phone No.'s and social security No.'s on separate sheet)

(1) Name _____ Home Address (not P.O. Box) Street Address _____ City _____ State _____ Zip _____	Home Phone No. _____	SOCIAL SECURITY NO. _____ State _____ Zip _____
(2) Name _____ Home Address (not P.O. Box) Street Address _____ City _____ State _____ Zip _____	Home Phone No. _____	SOCIAL SECURITY NO. _____ State _____ Zip _____
(3) Name _____ Home Address (not P.O. Box) Street Address _____ City _____ State _____ Zip _____	Home Phone No. _____	SOCIAL SECURITY NO. _____ State _____ Zip _____

9. Describe the exact business activity at this location, stating the major products and/or services sold:

Is the business Retail Wholesale Both Manufacturer Amusement Service Percent _____% Wholesale
 Percent _____% Retail

10. Using the BUSINESS ACTIVITY CODE listing on the back of this application, enter the code number that best describes your type of business operation. _____	11. Do you operate more than one business location in Clifton and Tennessee <input type="checkbox"/> No <input type="checkbox"/> Yes — How many additional locations? (IF YES ATTACH ADDITIONAL NAMES AND ADDRESSES)
---	---

12. Have you ever had a City of Clifton Business Tax License prior to now? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES give the name and address of your last business. Name _____ Address _____ Zip _____	13. REASON FOR FILING THIS APPLICATION: <input type="checkbox"/> Starting a new business <input type="checkbox"/> Change in corporate structure <input type="checkbox"/> Change in the ownership of, or the purchase of an existing business. Enter the name and City License Number of the business you are purchasing. Name _____ License No. _____
---	---

14. This application must be received within 20 days from commencement date of business or penalty and interest apply *

* Minimum Fee	\$ 15.00
* Penalty — (5% for each 30 days or fraction thereof not to exceed 25%)	\$ _____
* Interest (_____ % per annum from delinquent date until paid) (_____ x No. days delinquent).	\$ _____
* Recording Fee	\$ 5.00
* Total payment due, MAKE CHECK IN THIS AMOUNT	\$ _____

15. THE STATEMENTS MADE IN THIS APPLICATION ARE MADE TO THE BEST OF MY KNOWLEDGE AND BELIEF.
 (This application must be signed by the individual/owner, or by Officer of a Corporation.)

By: _____ Date _____
 Signature of owner, partner, or corporation officer
 (do not print signature)

MAIL TO: CITY OF CLIFTON, P. O. BOX 192, CLIFTON, TENNESSEE 38425

NOTICE — The Eighty-Seventh General Assembly of the State of Tennessee enacted effective June 1, 1971, Public Chapter 307, known as the "BUSINESS TAX ACT" which, in effect, imposes a tax on the privilege of conducting various businesses within this state. Each person subject to this tax is required by law to pay initially an initial minimum tax of \$15.00 which payment may be credited against subsequent payments of tax required to be paid annually upon a gross receipt basis.