

CITY OF DAPHNE BUSINESS APPLICATION

PO DRAWER 1047  
DAPHNE, AL 36526  
251-620-1250  
revenuedept@daphneal.com



Please print or type. See reverse side for instructions & further information.

FORM OF OWNERSHIP:  Sole Proprietor  Partnership  Corporation  LLC

FEDERAL TAX ID#: \_\_\_\_\_ STATE OF ALABAMA TAX ID #: \_\_\_\_\_

APPLICATION DATE: \_\_\_\_\_ DATE BUSINESS ACTIVITY INITIATED/PROPOSED IN DAPHNE: \_\_\_\_\_

APPLICATION TYPE:  New  Owner Change  Name Change  Location Change  Tax Account Only

HOME BASED BUSINESS:  Yes  No *If Yes, please complete the Home-Based Supplement Form provided by the Revenue Division.*

LEGAL BUSINESS NAME: \_\_\_\_\_

DOING BUSINESS AS: \_\_\_\_\_

**ANTICIPATED GROSS REVENUE FROM START DATE THROUGH DECEMBER 31 (current year):** \_\_\_\_\_

PHYSICAL PRESENCE IN CITY LIMITS (i.e. sales/service/deliveries inside Daphne jurisdiction):  Yes  No

BRIEF DESCRIPTION OF BUSINESS ACTIVITIES (i.e. retail clothing sales, wholesale food sales, rental of industrial equipment, carpentry contractor, etc.): \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS(ES): \_\_\_\_\_

LIST NAMES OF OWNER(S), PARTNER(S) OR OFFICER(S) (attach a separate sheet, if necessary):

NAME	RESIDENTIAL ADDRESS	SSN	TITLE

*This application has been examined by me and is, to the best of my knowledge, a true and complete representation of the above-names entity and person(s) listed.*

\_\_\_\_\_  
*Applicant Signature* *Title* *Date*

THIS AREA FOR CITY OF DAPHNE USE ONLY.				
DATE:	AMT PAID:	CHK / CASH / CC	BY:	NAICS CODE:
				TAXPAYER ID:

**Please read the following information concerning the completion of this form:**

1. Please complete all areas of the form except for the shaded area at the bottom. Form should be typed or printed legibly.
2. Form should be dated and signed by owner(s), partner(s), officer(s) of the business.
3. Items that will be needed:
  - Owner/Officer Driver's License
  - Any State of Alabama Certification (Home Builder, General Contractors, etc.)
  - Food Permit for Restaurants
  - Cottage Food Certification for any home-based businesses that are making any baked/cooked products
4. Form will initiate the process for registering your business with the City of Daphne.
5. If your business will have a physical location within the City of Daphne, please use that address on the front of this form. (Please complete separate forms for each physical location within in the City.) Physical location will require internal paperwork.
6. If your business will be out of your residence that is located inside the City of Daphne, please complete the home-based business application.
7. Upon receipt of the completed form, the City of Daphne will provide any additional forms and information regarding other specific requirements to you in order to complete the licensing process.
8. All license renewals are due January 1 and delinquent after January 31, with the following exception: INSURANCE COMPANY LICENSE, which are delinquent after March 1.
9. This form is intended as a simplified, standard mechanism for businesses to initiate contact with the City of Daphne concerning their activities within the City. A business license will be required prior to engaging business. If a business intends to maintain a physical location within the City limits, there are normally zoning and building code approvals required prior to the issuance of a license.
10. In certain instances, a business may simply be required to register with the City to create a mechanism for the reporting and payment of any tax liabilities. If that is the case, you will be provided the materials for that registration process.
11. The completion and submission of this form does not guarantee the approval of subsequent issuance of a license to do business. Any prerequisites for a particular type and location of the business must be satisfied prior to licensing.

Should there be any questions concerning the completion of this form or the licensing and/or registration process, please call the City of Daphne Revenue Division at 251-620-1250 or email us at [revenuedept@daphneal.com](mailto:revenuedept@daphneal.com) .