

CITY OF THOMASVILLE

P. O. BOX 368 • 10 SALEM STREET • THOMASVILLE, NC 27361
TEL: (336) 475-4249 • FAX: (336) 475-4258

APPLICATION FOR BUSINESS LICENSE

1. Date of Application: _____

2. Start Date of Business: _____

3. _____
Business Name/ DBA Parent Corporation (if applicable)

4. _____
Business Location City State Zip

5. _____
Business Mailing Address (If different) City State Zip

6. _____
Description of Business Activity

7. Check One: ___ Corporation ___ Sole Proprietor ___ Partnership ___ Professional Assn. ___ Other _____

8. _____
Business Phone Number Fax Number Emergency Number

9. _____
Business Email Address

10. _____
Owner Name Phone Number

11. _____
Owner Address City State Zip

12. _____
Corporate Officer/Manager/Other Title Phone Number

13. _____
Corporate Officer/Manager/Other Address City State Zip

14. If you do **NOT** own the building where your business is located, please list the property owner's information:

Name: _____ Phone Number _____

15. Number of locations within the city limits _____

16. State Professional License Number: _____

****Please sign and complete all applicable categories on page 2****

17. Number of Video & Arcade Machines (Sweepstakes machines are illegal): _____

18. Number of Beauty & Nail Salon Operators: _____

19. Number of Hotel / Motel rooms: _____

20. Number of Lanes per Bowling Alley: _____

21. Number of Days in Operation of Circus, Pony Rides, Etc.: _____

22. Eating or drinking establishments seating capacity number of seats: _____

▶ **The permit fee for a business license is \$25.00. All checks should be made payable to the City of Thomasville.**

▶ **If you have any questions about being in compliance with the Zoning Ordinance, contact our Planning & Zoning office at (336) 475-4255. For any questions concerning the building codes or the occupancy of the building, please contact the Building Inspector at (336) 475-4253. *Changing the use of a building may require an occupancy inspection which has a permit fee of \$50.00.***

▶ **You must have an inspection made by the fire marshal prior to the start date of your business. Please contact Rocky Watts at (336) 475-5527 or email rocky.watts@thomasville-nc.gov.**

▶ **You are required to register your business name with the Register of Deeds in Davidson County. You can contact them at (336) 242-2150. When we process your application, you will need to furnish us a copy of this form. If incorporated, we can use your registration with the Secretary of State.**

By completing this application the licensee named herein is complying with all legal requirements respecting the same, and is authorized to carry on business as described in City of Thomasville Municipal Code Ordinance No. 04-19-ORD6. To the best of my knowledge the information contained in this application is true and correct. Upon receipt of payment for this business license, it does not authorize, permit, or allow certificate holder to do any act not authorized by any law. This license is not transferable or assignable. Renewal of this license is the responsibility of the licensee and must be done annually prior to June 30th in order to avoid penalties.

Signature

Title

Print Your Name

Date

(FOR CITY USE ONLY: To all departments listed below, please process this application for a business license.)

___ Planning / Zoning: _____ Date: _____ E-mailed: _____

___ Building Inspector: _____ Date: _____ E-mailed: _____

___ Electrical Inspector: _____ Date: _____ E-mailed: _____

___ Fire Inspector: _____ Date: _____ E-mailed: _____

Notes: _____
