

CHEROKEE COUNTY, ALABAMA

PRIVILEGE (BUSINESS) LICENSE APPLICATION

NAME OF BUSINESS: _____

OWNER'S NAME: _____

LOCATION OF BUSINESS: _____

MAILING ADDRESS (if different): _____

MANAGER'S NAME: _____

OWNER'S HOME PHONE: _____

OWNER'S BUSINESS PHONE: _____

FEDERAL IDENTIFICATION NUMBER: _____

OWNER'S SOCIAL SECURITY (if no FEIN): _____

DESCRIPTION OF BUSINESS: _____

NAME OF PERSON FILLING OUT THIS FORM: _____

POSITION OF PERSON FILLING OUT THIS FORM: _____