



# CITY OF TUTTLE BUSINESS OCCUPANCY LICENSE

PERMIT # \_\_\_\_\_ Fee: \$35.00

## APPLICANT INFORMATION

Name:		Date:	
Address:	City:	State:	Zip:
DOB:	Phone 1:	Phone 2:	
Applicant Signature:			

## BUSINESS INFORMATION

Business Name:	Business Phone:
Mailing Address:	Type of Business:
Owner of Building:	Phone:
Seasonal or Temporary? <input type="radio"/> Yes <input type="radio"/> No	If Yes, give dates of operation:
Sales Tax ID#	EIN (or SS#)

## ALARM/BUSINESS IDENTIFICATION PROGRAM

Number of Employees:	Typical Operating Hours & Days:
Are there hazardous chemicals stored on the premises? <input type="radio"/> Yes <input type="radio"/> No	
If yes, please list:	
Does your business have an alarm? (If yes, please complete information below) <input type="radio"/> Yes <input type="radio"/> No	
Alarm Company Name:	State License #
Alarm Company Phone #:	
Type/Coverage of Alarm:	

## EMERGENCY CONTACTS

Name	Primary Phone #	Second Phone #