



APPLICATION FOR COMMERCIAL BUSINESS LICENSE

Application to be submitted by business owner along with \$125.00 fee.

*Please ensure all information is correct. Contact information will be displayed on Commercial Business License.

Business Property Address: _____

Property Owners Name: _____

Name of Business: _____

Business Owners Name: _____

Business Mailing Address: _____

Business Phone Number: _____

Phone Number for After-Hours Emergency#: _____

Business Owner Email: _____

Business' Hours of Operation: _____

Property Manager Contact Information: _____

Number of Commercial Units: _____ Number of Residential Units: _____

Describe Unit:

(i.e. 2 story brick, 1st floor restaurant dining area, 2nd floor apt, 2 storage rooms, 2 restrooms, 2 kitchens, shed)

Location of Off-Street Parking: _____

FOR BOROUGH USE:

Block No. _____ Unit No. _____

Zoning District: _____

Type of Use: _____

Inspection Report:

Date: _____