



## Business Tax Receipt (BTR) Application

- New Business
- Change of Address
- Change of Ownership
- Transfers of Ownership
- Business Name Change
- Other

Date \_\_\_\_\_

Business Name \_\_\_\_\_

DBA (fictitious name) CORP NAME:

\_\_\_\_\_

Business Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Mailing Address (if different): \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business email: \_\_\_\_\_

Federal Tax ID#/SS: \_\_\_\_\_

Owner's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Website/Email: \_\_\_\_\_ Alternate Phone # \_\_\_\_\_

Nature of business: \_\_\_\_\_

\_\_\_\_\_

Signature (Owner of the business, authorized representative, officer or partner)

The holder of a business tax receipt shall notify the Finance Department in writing of any change in the information set forth in the application within seven (7) Days after such change occurs.

### OFFICE USE ONLY

- SIC CODE \_\_\_\_\_
- FEE \_\_\_\_\_
- Business CUST# \_\_\_\_\_
- Individual CUST# \_\_\_\_\_
- Parent Business CUST# \_\_\_\_\_

- HOME INDUSTRY Y \_\_\_\_ N \_\_\_\_
- Fiscal Year: Oct 1<sup>st</sup> – Sept 30<sup>th</sup>
- Half Year April 1<sup>st</sup> – Sept 30<sup>th</sup>
- Minimum Housing Fee \_\_\_\_\_