

CITY OF MURPHYSBORO

BUSINESS LICENSE APPLICATION

APPLICATION NO. _____ ANNUAL LICENSE FEE DUE MAY 1ST: \$ _____

(PLEASE TYPE OR PRINT)

1. Applicant's Name: _____ PHONE () _____
2. Applicant's Address _____
City _____ State _____ ZIP _____
3. Length of resident at above address _____ years _____ months
4. Applicant's Date of Birth ___ / ___ / ___ Social Security No. _____
5. Marital Status _____ Name of Spouse _____
6. Citizenship of Applicant _____
7. Business Name _____ PHONE () _____
8. Business Address _____
City _____ State _____ ZIP _____
9. Length of Employment _____ years _____ months
10. All residences and addresses for the last three (3) years if different than above:

11. Name and Address of employers during the last three (3) years if different than above:

12. List the last three (3) municipalities where applicant has carried on business immediately preceding the date of application:

13. A description of the subject matter that will be used in the applicant's business:

14. Has the applicant ever had a license in this municipality? Yes No
If so, when _____
15. Has a license issued to this applicant ever been revoked? Yes No
If "yes", explain: _____
16. Has the applicant ever been convicted of a violation of any of the provisions of this Code, etc.?
 Yes No If "yes", explain: _____
17. Has the applicant ever been convicted of the commission of a felony? Yes No
If "yes", explain: _____
18. LICENSE DATA: Term of License _____
Fee for License \$ _____
Sales Tax Number _____
License Classification _____
19. LIST ALL OWNERS IF LICENSE IS FOR LOCAL BUSINESS (PERMANENT):

CITY OF MURPHYSBORO
OFFICIAL BUSINESS LICENSE

STATE OF ILLINOIS)
COUNTY OF JACKSON) ss.
CITY OF MURPHYSBORO)

ILLINOIS SALES TAX NUMBER _____

TO ALL TO WHOM THESE PRESENTS SHALL BECOME GREETINGS:

WHEREAS _____,
having complied with all the requirements of the laws of the State of Illinois and the ordinances of the **City of Murphysboro, Illinois** in this behalf made and required license is, by authority of the **City of Murphysboro, Illinois** given and granted to the _____
_____ to _____ at _____
_____ in the **City of Murphysboro, County of Jackson, and State of Illinois**,
from the _____ date hereof until the _____ day of _____, _____, said _____
_____ to be subject to all laws of the State of Illinois and all ordinances of the **City of Murphysboro, Illinois**, not in conflict therewith, which are now or hereafter may be in force touching the premises.

(L.S.)

Given under the hand of the Mayor of the **City of Murphysboro, County of Jackson, Illinois** and the seal thereof, this _____ day of _____, _____.

MAYOR
CITY OF MURPHYSBORO

COUNTERSIGNED:

CITY CLERK
CITY OF MURPHYSBORO

(SEAL)

