

TOWN OF BERLIN, ALABAMA

BUSINESS LICENSE APPLICATION

Complete on-line at <https://BerlinAL.gov/business-licenses>

CONFIDENTIAL

Complete and Mail To:

TOWN OF BERLIN

461 COUNTY ROAD 1615
CULLMAN, AL 35058
CLERK@BERLINAL.GOV
WWW.BERLINAL.GOV
(256) 736-3138

2023

Applicant Complete This Box

FEIN or SSN #: _____

STATE of ALABAMA TAX #: _____

FORM OF OWNERSHIP

Sole Prop. _____ Partnership _____
Corp. _____ Prof Assoc _____
LLC _____ Other _____

Application Type: NEW **Last year's business license #:** _____ (if known) **Owner Change:** _____ **Other:** _____

Legal Business Name: _____

Trade Name: (If different from above) _____

Business Activities: (Brief description- Retail clothing sales, wholesale food sales, rental of property, computer consulting, etc.)

Physical Address: _____
(Street) (City) (State) (Zip)

Mailing Address: _____
(Street) (City) (State) (Zip)

Telephone: _____
(Business) (Fax) (Home Phone)

MOST COMMON FEE SCHEDULES (for complete list see <https://BerlinAL.gov/business-licenses>)

GENERAL		DELIVERY		INSURANCE – FIRE & MARINE		INSURANCE - OTHER	
GROSS RECEIPTS	AMOUNT DUE	GROSS RECEIPTS	AMOUNT DUE	GROSS RECEIPTS	AMOUNT DUE	GROSS RECEIPTS	AMOUNT DUE
Any	.0005 on all GR	\$10,000 - \$75,000	\$37.50	Any	.04 on all GR from within town limits	Any	.01 on all GR from within town limits
		Over \$75,000	\$37.50 PLUS .0005 on all GR over \$75,000 within limits				

BUSINESS CONTACT INFORMATION

Provide the information below for all principal business contacts. Please provide an attachment with any additional officers if necessary.

	CONTACT 1	CONTACT 2	CONTACT 3
NAME:	_____	_____	_____
TITLE:	_____	_____	_____
PHONE:	_____	_____	_____
EMAIL:	_____	_____	_____

Date Business Activity Initiated or Proposed in Berlin: _____ **# Of Employees in Berlin:** _____

Gross receipts from sales of merchandise, tobacco, gas, rents, real estate, etc., (less **taxes collected**) in 2022 - _____
 A _____ License amount due from gross receipts or delivery license
 B+ _____ Late penalty + 15 % after January 31, additional 15% due after 60 days
 C+ _____ **ISSUANCE FEE = \$14.00 OR \$10.00 FOR DELIVERY LICENSE**
 D= _____ **TOTAL DUE**

INCLUDE COPIES OF STATE LICENSES OR CERTIFICATES AS REQUIRED

Driver's License Info (ATTACH COPY) Driver's License #: _____	Expiration Date: _____
Date: _____	Signature: _____ Title: _____

***REQUIRED* BUSINESS LICENSE SIGNATURE**

The undersigned person declares that under the penalties of perjury the renewal for this license has been examined and to the best of their knowledge believes it is a true, accurate, and complete statement. The undersigned also declares that under the penalties of perjury he/she is a legal resident and/or citizen of the United States of America and has attached supporting documentation.

SIGNATURE: _____ **DATE:** _____

With complete information provided, your Town of Berlin Business License will be mailed to you within 30 days of receipt of your payment.

<u>THIS AREA FOR MUNICIPAL USE ONLY</u>		
PAID: _____	PAYMENT TYPE: _____	RECEIVED: _____
NAICS#: _____	LICENSE #: _____	

PLEASE READ THE FOLLOWING INFORMATION CONCERNING THE COMPLETION OF THIS FORM

- Please complete all areas of the form except for the shaded area
- Form should be typed or printed legibly
- Form should be dated and signed by an owner, partner, or officer of the business
- Form will initiate the process for registering or renewing your business with the municipality

- ⇒ If your business has a physical location within the municipality, please include that address as well as your mailing address. (Complete separate forms for each physical location in the town)
- ⇒ After completing this form, it can be mailed or brought in person to the Town Hall. It is preferred that forms be submitted online.
- ⇒ Upon receipt of the completed form, the municipality will provide any additional forms and information regarding other specific requirements to you in order to complete the licensing process.

**All license renewals are due January 1 and delinquent after January 31 with the following exceptions:
INSURANCE COMPANY LICENSE: DUE JANUARY 1, DELINQUENT AFTER MARCH 1**

The completion and submission of this form does not guarantee the approval or subsequent issuance of a license to do business. Any prerequisites for a particular type and location of the business must be satisfied prior to licensing.

Should there be any questions concerning the completion of this form or the licensing and/or registration process, please call the number on the front of this form to obtain a more detailed explanation.