

Barry E. Robertson  
Commissioner of Licenses



Kevin Klimasewski  
Compliance Officer

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Anniston, AL 36201

Calhoun County  
**Commissioner of Licenses**  
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Phone 256 241 2900  
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**APPLICATION FOR BUSINESS LICENSE**

**EMAIL** [license@calhouncounty.org](mailto:license@calhouncounty.org)

BUSINESS NAME: \_\_\_\_\_

FEDERAL ID NUMBER/SOCIAL SECURITY NUMBER: \_\_\_\_\_

OWNER/CORP. OFFICER: \_\_\_\_\_

BUSINESS LOCATION: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

MAILING ADDRESS:(IFDIFFERENT) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ Inside City Limits:(Y/N) \_\_\_ (Calhoun only)

EMAIL: \_\_\_\_\_

DATE BUSINESS TO BEGIN OPERATION: \_\_\_\_\_

CAPITAL INVESTMENT: \_\_\_\_\_

EST GROSS INCOME FOR CALHOUN COUNTY: \_\_\_\_\_

TYPE OF OWNERSHIP: SOLE OWNERSHIP \_\_\_ PARTNERSHIP \_\_\_ CORP. \_\_\_ LLC: \_\_\_

TYPE OF MERCHANDISE SOLD OR SERVICES RENDERED:  
\_\_\_\_\_  
\_\_\_\_\_

DATE SIGNED: \_\_\_/\_\_\_/\_\_\_\_\_

SIGNED: \_\_\_\_\_

**COUNTY USE ONLY:**

**ACCOUNT NUMBER:**  
\_\_\_\_\_

**SECTIONS ISSUED:**  
\_\_\_\_\_  
\_\_\_\_\_

**DATE:** \_\_\_\_\_