



City of Piedmont Business Application

\$35.00 per each business per year (January 1 or present year to January 1 of following year)

Owner's Name: _____

Name of Business: _____

<u>Physical Addresses</u>	<u>Mailing Address (If Different)</u>
Street: _____	Street: _____
City: _____	City: _____
State: _____ Zip Code: _____	State: _____ Zip Code: _____

Business Type: _____

OK Sales Tax Number: _____

Email Address: _____

Business Phone Number: _____ Cell Phone Number: _____

Will you be serving alcoholic beverages at your business? Yes No

If yes, please complete the Alcoholic Beverages Permit Application.

Comments: _____

Signature: _____ Date: _____

***** **Office Use Only** *****

- \$35.00 Fee Received
- Copy of Valid Driver's License
- Copy of State Tax Commission License
- Copy of State Health Department (If serving food)

Receipt Number: _____

Date Posted: _____