

**CITY OF WHEELER
BUSINESS LICENSE APPLICATION**

Date: _____

Name of Business: _____

Nature of Business: _____

Street and Mailing Address: _____

Name of Person or Persons Owning Business: _____

_____ Business Phone: _____

Residence Address of Owner or Owners: _____

_____ Phone: _____

_____ Phone: _____

Number of Employees as of date of application: ____; Number of seasonal Employees as of date of application, ____ and length of employment season: _____

Have the following requirements as described in the City Zoning Ordinance No. 79-2 been met?

1. Parking, Article 11, Section 11.090: YES () NO ()

2. If Home Occupation, Article 11, Section 11.060: YES () NO ()

Have the requirements of the Sign Ordinance No. 99-02 been met?

YES () NO ()

Is this a new business? YES () NO (), if NO, has the character of your business changed during the last year, or do you anticipate any change in the future? YES () NO ()

If YES, briefly explain the changes: _____

If more than one type of business will be under this license, please list each type:

I hereby affirm that the above information is true to the best of my knowledge and belief:

Signature _____

Title _____

The City of Wheeler is an equal opportunity provider.

NOTE: Application and payment of the License fee herein required are due and payable on or before July 1st of each year. Fees unpaid as of August 1st are subject to a penalty of 1.5% per month for every month they remain unpaid.

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At all times after the issuance of the License, the Licensee will cause it to be posted in a conspicuous place upon the business premises, available for inspection by the public and by employees and prospective employees of the business.