

CITY OF GOOD HOPE, ALABAMA

BUSINESS LICENSE APPLICATION

The City Does Not Impose the Business License TAX in its Police Jurisdiction

Complete & Mail/Fax/Email To:

CITY OF GOOD HOPE
135 Municipal Drive
Cullman, AL 35057
Phone (256)739-3757 Fax (256)739-5340
Email: clerk@goodhopeal.com

*Please complete all areas of the form. Type or Print Legibly

Applicant Complete This Box

Federal ID No: _____

State of AL Tax No: _____

Type of Ownership (Check One)

Sole Prop. _____ Partnership _____

Corp. _____ Prof Assoc _____

LLC _____ Other _____

Date & Sign at the bottom.

**FORM
MUST
BE SIGNED
& INCLUDED
W/ PYMT
IN ORDER
TO ISSUE
LICENSE
(per Auditor)**

Application Type: New _____ Renewal _____ Owner Change _____ Name Change _____ Location Change _____

Legal Business Name: _____

Trade Name: (If Different) _____

Business Activities: (Brief Description - ex: Retail Clothing Store, Wholesale Food Sales, Rental, Consulting, Etc....)

Physical Address

Street City State Zip

Mailing Address: (If Different)

Street City State Zip

Telephone

Business Fax Cell

Name & Phone # for Contact Person _____

Email Address for Contact Person _____

List Following for Owners, Partners, or Officers (Attach separate sheet if necessary)

Name Residence Address SS No (if not publicly traded) Title

Date Business Activity Initiated / Proposed in Good Hope: _____ # of Employees in Good Hope _____

TOTAL GROSS RECEIPTS FROM THE PREVIOUS YEAR: \$ _____ *REQUIRED

This application has been examined by me and is, to the best of my knowledge, a true and complete representation of the above named entity, and person(s) listed. By signing below I am swearing to the gross receipts for the previous year.

Date: _____ Signature: _____ Title: _____

All license renewals are due January 1, Delinquent after Jan 31 with the exception of Insurance Companies, delinquent after March 1

This form is intended as a simplified, standard mechanism for businesses to initiate contact with a municipality concerning their activities within that city. A business license will be required prior to engaging in business. If a business intends to maintain a physical location within the city, there are normally zoning and building code approvals required prior to the issuance of a license. 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.

* THIS FORM MUST BE SIGNED W/ GROSS RECEIPT AMOUNT INCLUDED BEFORE LICENSE IS ISSUED

**City of Good Hope
2017 Business License Fee**

SCHEDULE "A - F" Gross Receipts Equal License Amount, Plus:

**\$12.00 Issue Fee
Add this to License**

GROSS RECEIPTS				Amount Due:
More Than	but	Less Than		
\$ -		\$ 99,999.00		\$ 100.00
\$ 100,000.00		\$ 199,999.00		\$ 150.00
\$ 200,000.00		\$ 299,999.00		\$ 200.00
\$ 300,000.00		\$ 399,999.00		\$ 250.00
\$ 400,000.00		\$ 499,999.00		\$ 300.00
\$ 500,000.00		\$ 599,999.00		\$ 350.00
\$ 600,000.00		\$ 699,999.00		\$ 400.00
\$ 700,000.00		\$ 799,999.00		\$ 450.00
\$ 800,000.00		\$ 899,999.00		\$ 500.00
\$ 900,000.00		\$ 999,999.00		\$ 600.00
\$ 1,000,000.00		\$ 1,099,999.00		\$ 700.00
\$ 1,100,000.00		\$ 1,199,999.00		\$ 800.00
\$ 1,200,000.00		\$ 1,299,999.00		\$ 900.00
\$ 1,300,000.00	and over -----			\$ 1,000.00

Schedule A - F is the most commonly used license structure but may vary depending on type of business.

If you are unsure of your rate please call City Hall (256)739-3757 Address: 135 Municipal Drive Cullman, AL 35057

**** Mobile Home Dealers Rate are Different, Please call City Hall for Rate (256)739-3757**

TOTAL GROSS RECEIPTS FROM THE PREVIOUS YEAR: \$ _____

This application has been examined by me and is, to the best of my knowledge, a true and complete representation of the above named entity, and person(s) listed. By signing below I am swearing to the gross receipts for the previous year.

Date: _____ **Signature:** _____

Title: _____