

SHELBY COUNTY CLERK BUSINESS LICENSE APPLICATION

Make check payable to "SHELBY COUNTY CLERK" and mail to Shelby County Clerk, 150 Washington Ave., Memphis, TN 38103

Shelby County License Fee \$15.00
If located in Memphis, add City License Fee \$15.00
Total Due

CONTACT OUR OFFICE AT (901) 222-3059.	OWN ELTE AND O	NSIGNED APP	LICATIONS WILL DELAY F	PROCESSING. FOR ASSISTANCE, PLEASE
1. License Type: ☐ Standard (Gross Receipts over \$10K) ☐ Minimal A		Activity (Gross Receipts \$3,000-\$10,000)		
2. Fiscal Year End: 3. Date Bu		usiness began in TN at this location:		
4. BUSINESS NAME AND EXACT LOCATION		5. BUSINESS MAILING ADDRESS		
BUSINESS NAME		NAME (ENTER LEGAL NAME (DBA), IF DIFFERENT)		
STREET, HIGHWAY (DO NOT USE P.O. BOX NUMBER OR RURAL ROUTE NUMBER)		P.O. BOX, STREET, ROUTE, OR HIGHWAY		
APARTMENT OR SUITE NUMBER		APARTMENT OR SUITE NUMBER		
CITY STATE ZIP CODE		CITY STATE ZIP CODE		
6. BUSINESS PHONE NUMBER		BUSINESS FAX NUMBER		
7. CONTACT NAME		CONTACT E-MAIL		
8. CURRENT SALES TAX NUMBER FOR THIS BUSINES:				
9. TYPE OF OWNERSHIP (SELECT ONE): <u>Business FE</u>				
☐ Corporation (all types) FEIN: ☐ Sole Proprietorship SSN:				
☐ Multi-Member LLC FEIN: ☐ Single-Member LLC FEIN:				
☐ Partnership (all types) FEIN:	(for Marital	Partnership	s, see Marital Joint Ow	nership below)
☐ Marital Joint Ownership (both spouse's SSN:		, ,,)	
11. IDENTIFY OFFICERS, PARTNERS, INDIVIDUAL, OR	COMPANY OW	/NERS (attach	additional names/info on s	eparate sheet if needed)
(1) NAME TELEPHO	ONE		☐ SOCIAL SECURITY NUMBER	<u>or</u> □ Federal ein
HOME ADDRESS (DO NOT USE P.O. BOX #)			STATE	ZIP CODE
E-MAIL				
(2) NAME TELEPHO	TELEPHONE		☐ SOCIAL SECURITY NUMBER <u>or</u> ☐ FEDERAL EIN	
TEEL IN			SOCIAL SECURITY NUMBER	R <u>or</u> FEDERAL EIN
			STATE	R <u>or</u> □ FEDERAL EIN ZIP CODE
HOME ADDRESS (DO NOT USE P.O. BOX #)				
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