

**City of Northport, Alabama**  
**Transient Merchant (Door-to Door/Peddler) Business License Application**

Note: The City of Northport Imposes its Business License Tax Within its Police Jurisdiction.

**(CONFIDENTIAL)**

3500 McFarland Boulevard  
P.O. Box 569  
Northport, AL 35476

Phone (205)339-7000  
Fax (205)333-3016

**Please Print or Type**  
See Reverse Side for Instructions and Further Information

Application Date: \_\_\_\_\_ Proposed Start Date: \_\_\_\_\_

**Application Type:**    New    Owner Change    Name Change    Location Change    Reactivation

**Legal Business Name** \_\_\_\_\_

**Trade Name (DBA) if different from above** \_\_\_\_\_

**Brief description of business activity in Northport** \_\_\_\_\_  
(Example: retail clothing sales, wholesale food sales, rental of industrial equipment, computer consulting)

**Form of Ownership**

Sole Proprietorship    Partnership    Corporation    LLC    Other (Specify) \_\_\_\_\_ (If LLC, LLP or Corp. please attach signed Affidavit )

**Physical Address**

- \_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)

**Mailing Address**

\_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)

**(Business) Telephone** \_\_\_\_\_ **Fax** \_\_\_\_\_ **(E-Mail)** \_\_\_\_\_

**FEIN** \_\_\_\_\_ **ST of Ala Tax #** \_\_\_\_\_

**List the Owner(s), Partners or Officers (Attach separate sheet if necessary) Include copies of Drivers Licenses.**

Name                      Residence Address                      SSN                      DL ST. # & Exp. date                      Home Phone                      DOB

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**TITLES** (Owner, Pres etc.) 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**Name and phone number for contact person** \_\_\_\_\_

**If business has physical location in Northport, list name of manager** \_\_\_\_\_

**# of Employees** \_\_\_\_\_ **# of Door-to-Door solicitors** \_\_\_\_\_ (attach a list of each solicitor that will be in the City)

**Land/Building:**    Own    Rent

**If Rent:** Owner: \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**Please Complete the Following**

<p><b>Business operated from</b> <input type="checkbox"/> home <input type="checkbox"/> store front or office.</p> <p><b>Physical Location:</b> <input type="checkbox"/> City <input type="checkbox"/> Police Jurisdiction <input type="checkbox"/> Outside Corporate Limits &amp; PJ</p> <p><b>Tax Types:</b> <input type="checkbox"/> Sales/Sellers Use <input type="checkbox"/> Consumer Use <input type="checkbox"/> Rental <input type="checkbox"/> Business License (Annual)</p> <p><b>Tax Filing Frequency:</b> <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annual <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Other _____</p> <p><b>Business Type:</b> <input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Contractor <input type="checkbox"/> Service <input type="checkbox"/> Professional <input type="checkbox"/> Manufacturer  <input type="checkbox"/> Rental <input type="checkbox"/> Other _____</p>
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**By signing this license application you certify that all information provided on this document is true and correct and that you have read the City's Ordinance pertaining to Transient Merchants and are in compliance. You also certify, under penalty of perjury, that you are a U.S. Citizen or are lawfully present in the U.S. and are conducting this transaction on behalf of a U.S. Citizen or lawfully present alien**

**I UNDERSTAND THAT I CANNOT OPEN OR OPERATE THIS BUSINESS IN THE CITY OF NORTHPORT OR IT'S POLICE JURISDICTION UNTIL THIS APPLICATION IS APPROVED AND A BUSINESS LICENSE IS ISSUED AND EACH DOOR-TO-DOOR SOLICITOR HAS A PERMIT ISSUED BY THE CITY ALLOWING THEM TO GO DOOR-TO-DOOR.**

\_\_\_\_\_  
**Date**                                  **Signature**                                  **Title**

<p><b>Base License Amount (code: <u>45439</u> )</b></p> <p><b>Estimated Gross Receipts</b> for remainder of this year _____</p>																				
<p>Schedule "P" - If gross receipts are:</p>																				
<table border="1"> <tr> <td align="center">More Than but</td> <td align="center">Less Than</td> <td align="center"></td> </tr> <tr> <td align="center">0</td> <td align="center">20,000</td> <td align="center">\$180</td> </tr> <tr> <td align="center">20,000</td> <td align="center">50,000</td> <td align="center">300</td> </tr> <tr> <td align="center">50,000</td> <td align="center">100,000</td> <td align="center">400</td> </tr> <tr> <td align="center">100,000</td> <td align="center">150,000</td> <td align="center">500</td> </tr> <tr> <td align="center">150,000</td> <td align="center">200,000</td> <td align="center">600</td> </tr> </table>	More Than but	Less Than		0	20,000	\$180	20,000	50,000	300	50,000	100,000	400	100,000	150,000	500	150,000	200,000	600		
More Than but	Less Than																			
0	20,000	\$180																		
20,000	50,000	300																		
50,000	100,000	400																		
100,000	150,000	500																		
150,000	200,000	600																		
<p>All over \$200,000 is \$600 plus an additional amount of .1% on all in excess of \$200,000.</p>																				
<p><b>INSPECTION FEE</b> (For a business opening a physical location in the city)</p>																				

**Copies of acceptable proof of lawful presence must be included with application. (Affidavit for LLC, LLP, or Corp.)**

Include a copy of any State License or Certification          **ISSUE FEE: \$ 10.00**

**Send in this amount with application:**   
**TOTAL DUE:**

**This form is required for each owner or partner of a business and for each person signing for or conducting a transaction for the business.**

Legal Status:

Are you a U.S. Citizen? \_\_\_Yes \_\_\_No **Yes.** Please provide a copy of one of the approved documents with your application. **No** If you answered no to the above question, please provide your country of citizenship. Country of

citizenship:

**Please provide a copy of one of the unexpired approved documents showing that you are lawfully present in the U.S.**

I, \_\_\_\_\_(print name), hereby certify,  
Under the penalty of perjury, that I am a U.S. Citizen or am lawfully present in the United States.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Proof of Citizenship:

1. Driver's license or non-driver identification card issued by the Alabama Department of Public Safety. A driver's license or non-driver identification card issued by another jurisdiction will only be acceptable if there is language printed on the license or identification card, by the issuing jurisdiction that indicates that the person has provided satisfactory proof of United States citizenship. (The driver's license or non-driver identification card must be valid which means unexpired.)
2. U.S. birth certificate.
3. Valid or expired passport identifying the applicant and the applicant's passport number.
4. Naturalization documents or the number of the certificate of naturalization (number must be verified with the U.S. Bureau of Citizenship and Immigration Services by the county election officer or the Secretary of State).
5. Proof issued by the federal government pursuant to the Immigration and Nationality Act of 1952.
6. Bureau of Indian Affairs card number, tribal treaty card number or tribal enrollment number.
7. Consular report of birth abroad of a citizen of the U.S.
8. Certificate of citizenship issued by the U.S. Citizenship and Immigration Services.
9. Certification of report of birth issued by the U.S. Department of State.
10. American Indian card, with KIC classification, issued by the U. S. Department of Homeland Security.
11. Final adoption decree showing the applicant's name and U.S. birthplace.
12. Official U.S. military record of service with the applicant's place of birth in the U.S.
13. An extract from a U.S. hospital record of birth created at the time of the applicant's birth indicating the applicant's place of birth in the U.S.

Aliens Lawfully Present

1. A valid, unexpired Alabama driver's license.
2. A valid, unexpired Alabama non-driver identification card.
3. A valid tribal enrollment card or other form of tribal identification bearing a photograph or other biometric identifier.
4. Any valid United States federal or state government issued identification document bearing a photograph or other biometric identifier, if issued by an entity that requires proof of lawful presence in the U. S. before issuance.
5. A foreign passport with an unexpired U. S. Visa and a corresponding stamp or notation by the U.S. Department of Homeland Security indicating the bearer's admission to the U.S.
6. A foreign passport issued by a visa waiver country with the corresponding entry stamp and unexpired duration of stay annotation or an I-94 W form by the U.S. Department of Homeland Security indicating the bearer's admission to the U.S.

**Copies of acceptable proof of lawful presence must be included with application.**

**NOTE:** The Alabama Drivers License/ID *expires and must be presented for verification for each transaction.*

# Affidavit

I, \_\_\_\_\_ (print name), hereby certify,

Under the penalty of perjury, that the business listed below is a

\_\_\_\_\_ LLC    \_\_\_\_\_ LLP    \_\_\_\_\_ Corporation

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**Name of Business**

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**Signature**

**Date**

**Please print on Company letter head**

**You can include a copy of the company's documentation for verification**

**If you are a non-profit organization please include a copy of your non-profit papers.**

**The person signing this document must be verified as lawfully present in the U.S.**

**PLEASE READ THE FOLLOWING INFORMATION CONCERNING THE COMPLETION OF THIS FORM.**

- PLEASE COMPLETE ALL AREAS OF THE FORM EXCEPT FOR THE AREA NOTED “FOR OFFICE USE ONLY”.
- FORM SHOULD BE TYPED OR PRINTED LEGIBLY.
- FORM SHOULD BE DATED AND SIGNED BY AN OWNER, PARTNER, OR OFFICER OF THE BUSINESS.
- FORM WILL INITIATE THE PROCESS FOR REGISTERING YOUR BUSINESS WITH THIS MUNICIPALITY.

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- IF YOUR BUSINESS WILL HAVE A PHYSICAL LOCATION WITHIN THE MUNICIPALITY, PLEASE USE THAT ADDRESS ON THE FRONT OF THIS FORM. (Complete separate forms for each physical location in the city)
  - AFTER COMPLETING THIS FORM IT CAN BE MAILED WITH PAYMENT.
  - UPON RECEIPT OF THE COMPLETED FORM, THE MUNICIPALITY WILL PROVIDE ANY ADDITIONAL FORMS AND INFORMATION REGARDING OTHER SPECIFIC REQUIREMENTS TO YOU IN ORDER TO COMPLETE THE LICENSING PROCESS.

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**FRUIT OR PRODUCE VENDERS** LICENSES WILL EXPIRE AFTER 180 CONSECUTIVE DAYS AND CAN ONLY BE PURCHASED ONCE EVERY CALENDAR YEAR.

**DOOR-TO-DOOR SALES** LICENSES AND PERMITS WILL EXPIRE AFTER 90 CONSECUTIVE DAYS AND CAN ONLY BE PURCHASED ONCE EVERY CALENDAR YEAR.

**PEDDLERS** LICENSES WILL EXPIRE AFTER 15 CONSECUTIVE DAYS AND SHALL NOT BE ALLOWED MORE THAN TWO 15 DAY LICENSES WITHIN A CALENDAR YEAR.

THIS FORM IS INTENDED AS A SIMPLIFIED, STANDARD MECHANISM FOR BUSINESS 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.

IN CERTAIN INSTANCES, A BUSINESS MAY SIMPLY BE REQUIRED TO REGISTER WITH THE CITY TO CREATE A MECHANISM FOR THE REPORTING AND PAYMENT OF ANY TAX LIABILITIES. IF THAT IS THE CASE, YOU WILL BE PROVIDED THE MATERIALS FOR THAT REGISTRATION PROCESS.

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.

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SHOULD THERE BE ANY QUESTIONS CONCERNING THE COMPLETION OF THIS FORM OR THE LICENSING AND/OR REGISTRATION PROCESS, PLEASE CALL THE NUMBER ON THE FRONT OF THE APPLICATION TO OBTAIN MORE DETAILED EXPLANATION.

FOR BUSINESSES WITH A PHYSICAL OFFICE OR STORE FRONT LOCATION IN  
NORTHPORT:

IN ORDER TO ALLOW THE POLICE DEPARTMENT TO KNOW WHO TO CONTACT DURING AN AFTER HOURS EMERGENCY, OR AT OTHER TIMES WHEN THE BUSINESS IS NOT OPEN, PLEASE FILL OUT THE FOLLOWING FORM AS COMPLETELY AS POSSIBLE. THERE IS A SPACE FOR THE OWNER AND ALSO FOR UP TO THREE PEOPLE TO BE CALLED IN AN EMERGENCY. PLEASE LIST NAMES IN THE ORDER YOU WOULD WANT THE PEOPLE CONTACTED, SHOULD IT BE NECESSARY. THIS INFORMATION IS NOT GIVEN OUT TO THE PUBLIC AND REMAINS WITHIN THE POLICE DEPARTMENT FOR OFFICIAL USE ONLY. IF YOU HAVE ANY QUESTIONS, YOU MAY CONTACT THE COMMUNICATIONS OFFICE AT (205) 339-6600.

THANK YOU FOR YOUR ASSISTANCE,  
NORTHPORT POLICE DEPARTMENT

FAX (205) 333-3007

<b>BUSINESS NAME</b> _____	<b>PHONE</b> _____		
<b>ADDRESS</b> _____	<b>ALARM #</b> _____		
<b>WHERE LOCATED</b> _____			
<b>BUSINESS OWNER CONTACTS</b>			
	<b>NAME</b>	<b>HOME PHONE</b>	<b>ALT. PHONE</b>
<b>OWNER</b>	_____	_____	_____
<b>1</b>	_____	_____	_____
<b>2</b>	_____	_____	_____
<b>3</b>	_____	_____	_____
<b>PROPERTY OWNER CONTACTS</b>			
	<b>NAME</b>	<b>HOME PHONE</b>	<b>ALT. PHONE</b>
<b>OWNER</b>	_____	_____	_____
<b>1</b>	_____	_____	_____
<b>2</b>	_____	_____	_____
<b>3</b>	_____	_____	_____