

City of Northport

UNLICENSED BUSINESS INFORMATION

PO BOX 569*NORTHPORT, AL 35475

205/339-7000*Fax 205/333-3016

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This form is to be used to report work being done by a suspected unlicensed business in the City of Northport.

DATE: _____

NAME OF COMPANY: _____

NAME OF INDIVIDUAL: _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS: _____

LOCATION WHERE SEEN WORKING: _____

TYPE OF VEHICLE: _____ MAKE: _____ TAG# _____

PHONE NUMBER: _____

TYPE OF WORK BEING PERFORMED: _____

Reports must include a name and contact number for person reporting the information. All information will remain confidential.

REPORTED BY: _____

PHONE NUMBER(S): _____