

Previous Business Information Required for **New Business License Applicants** only.

1.) Have you previously operated any business? Yes _____ no _____

2.) If, so, please indicate the address of the business? _____

3.) Did you own the property where the business was operated? Yes _____ no _____

4.) If you rented or leased the property, please complete the following information.

Owner of Property:

Last Name, First Middle Residence Street Address City, State, Zip

(____) _____ (____) _____
Business Phone Residence Phone