

**CITY OF JACKSONVILLE**  
**320 Church Avenue SE**  
**Jacksonville, Alabama 36265-2651**  
**Phone (256)435-7611 Fax (256) 435-4103**

License Notice for New Business

***Schedule B***

DATE \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Customer # \_\_\_\_\_  
 Code \_\_\_\_\_  
 NAICS \_\_\_\_\_  
 License # \_\_\_\_\_

This is to notify you that your business license for engaging in the business of \_\_\_\_\_ within the City of Jacksonville, Alabama, or within the Police Jurisdiction thereof, is due. The City License is delinquent after the 15<sup>th</sup> day of business. A penalty of 15% is levied after the 15<sup>th</sup> day of business (provided for in Section 2 of Ordinance 454) and 30% with monthly interest of 1% after the 30th day of business.

Each person or entity classified as **Schedule B** shall pay a license in an amount as follows:

**\$125.00 plus \$0.75 (seventy-fifty cents) per \$1000.00 (one thousand dollars) of the estimated gross annual receipts for a 12-month period and \$12.00 issuance fee.**

Please complete the following statement and submit it together with your payment based on the above schedule.

Gross annual receipts \$ \_\_\_\_\_

\_\_\_\_\_  
 Owner or Authorized Signature

Fee based on above schedule \$ \_\_\_\_\_

\_\_\_\_\_  
 Please Print Name

Penalty (if applicable) \$ \_\_\_\_\_

\_\_\_\_\_  
 Name of Company

Interest (if applicable) \$ \_\_\_\_\_

Issuance Fee \$ 12.00

\_\_\_\_\_  
 Physical Address

TOTAL \$ \_\_\_\_\_

\_\_\_\_\_  
 City, State & zip code

\_\_\_\_\_  
 Certification/Permit # & Expiration Date (if applicable)

(\_\_\_\_\_) \_\_\_\_\_  
 Telephone Number

\_\_\_\_\_  
 E-mail Address

(\_\_\_\_\_) \_\_\_\_\_  
 Fax Number