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 D*** 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 15th day of business. A penalty of 15% is levied after the 15th 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 D** shall pay a license in an amount as follows:

The license fee is based on your estimated gross annual receipts for the calendar year business activity as follows:

Less than $15,000.00……..……..$75.00 plus $12.00 Issuance Fee
$15,000.00 to $30,000.00….....……..…….……....$100.00 plus $12.00 Issuance Fee
Over $30,000.00…….…...……..….$150.00 plus $1.00 per $1000.00 of gross receipts in excess of $30,000.00 plus $12.00 Issuance Fee

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

Gross annual receipts $_____

Fee based on above schedule $_____

Penalty (if applicable) $_____

Interest (if applicable) $_____

Issuance Fee $ 12.00

TOTAL $_____

_____
Certification/Permit # & Expiration Date (if applicable)

_____
E-mail Address

_____
Owner or Authorized Signature

_____
Please Print Name

_____
Name of Company

_____
Physical Address

_____
City, State & zip code

(_____)_____
Telephone Number

(_____)_____
Fax Number