APPLICATION FOR BUSINESS LICENSE

City of Sapulpa 425 East Dewey Avenue Sapulpa, OK 74066 918.248.5913

INSTRUCTIONS: Complete the application form (print or type only), and return it to the Office of City Clerk at the address shown above with a check or money order in the amount of \$15.00 made payable to the City of Sapulpa.

1.	Name of Business (DBA):	Telephone No			
2.	Business Site Location:Street Address	City	State	 Zip Code	
		oity	otato	210 0000	
3.	Business Mailing Address:	City	State	Zip Code	
4.	Business Ownership Status: Sole Proprietorship	Partnership	Corporation □	Non-Profit □	
	Limited Liability Company (LLC) \Box	Other	If other, list:		
5.	Owner/Principal/Corporate Officer Name:				
6.	Title: E-Mail Address:		Telephone:		
7.	Address:				
	P. O. Box/Street	City	State	Zip Code	
8.	Corporate Name, if applicable:				
9.	Corporate Address:				
	P. O. Box/ Street	City	State	Zip Code	
10.	rimary Function of Business: Industry Code Number:				
11.	Provide Oklahoma Tax Commission sales tax permit number, if applicable				
12.	Provide one: Federal Employer's Tax Identification Number:				
	Social Security Number:				
13.	Does your business involve the sale or rental of tangible personal property (merchandise, goods or products) or the furnishing of specified services such as transportation, meals, lodging, parking, etc.? Yes No No				
	If yes, a current copy of the sales tax permit issued by the Oklahoma Tax Commission must be submitted with the application.				
14.	Does your business receive natural gas from a system operating under a City Franchise? Yes ☐ No ☐				
unde	I hereby declare that to the best of my knowledge and belief rstand that any false statements made above are grounds for d				
Signature of Owner, or Authorized Agent		Di	Date		
Print Name		Ti	Title		
Contact Telephone Number:		E-Mail:			

Annual License Fee: \$15.00 non-refundable (Application for general business license)