

CITY OF HOSCHTON

Business License Application

NON-REFUNDABLE LICENSE FEE REQUIRED WITH EACH APPLICATION

See City Hall for Current Fee Schedule

Business Name

Federal Tax ID Number	_____
Georgia Sales and Use Tax ID Number	_____

Business Address	_____		

Phone Number	_____	Fax Number	_____
Mailing Address	_____		_____
	_____		_____

Owner/Officer	_____
Telephone	_____
Home Address	_____
E-mail Address	_____
	Social Security Number _____

Alarm Company Name	_____
Phone	_____

Type of Ownership (Circle One)	Sole Proprietor Corporation	Partnership LLC	Other
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State Professional License Number	(if applicable)	_____
Health Permit Number	(if applicable)	_____

