

DATE \_\_\_\_\_

NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_

CITY OF LOWELL  
APPLICATION FOR PRIVILEGE LICENSE

NAME OF BUSINESS \_\_\_\_\_  
BUSINESS ADDRESS \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_

TO CONDUCT THE FOLLOWING BUSINESS: WHOLESALE \_\_\_\_\_ RETAIL \_\_\_\_\_ PEDDLER \_\_\_\_\_

THE FOLLOWING INFORMATION MUST BE FURNISHED BEFORE A LICENSE CAN BE ISSUED:

INDIVIDUAL \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_ CORPORATION \_\_\_\_\_ TAX I.D. \_\_\_\_\_

IF INDIVIDUAL OR PARTNERSHIP LIST NAME(S) AND ADDRESSES; IF INCORPORATED, LIST NAMES AND ADDRESSES OF THE PRESIDENT AND SECRETARY:

1. \_\_\_\_\_  
name address
2. \_\_\_\_\_

PHONE NUMBERS: BUSINESS \_\_\_\_\_ OTHER \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_

LIST NAMES AND ADDRESSES OF ANY OTHER BUSINESS(ES) YOU OWN OR ARE ASSOCIATED WITH: \_\_\_\_\_

IF NEW BUSINESS, STATE EXACT DATE OPERATION BEGAN: \_\_\_\_\_

NAME OF PREVIOUS BUSINESS LOCATED AT THIS ADDRESS, IF KNOWN: \_\_\_\_\_

NUMBER OF EMPLOYEES (PART TIME AND FULLTIME) INCLUDING OWNER(S) AS OF JULY 1: \_\_\_\_\_

IF CONTRACTOR, LIST NORTH CAROLINA LICENSE NUMBER: \_\_\_\_\_, IF RESTAURANT, NUMBER OF SEATS \_\_\_\_\_, IF HOTEL OR MOTEL, NUMBER OF ROOMS \_\_\_\_\_, IF MANUFACTURING, NUMBER OF EMPLOYEES \_\_\_\_\_

IF MANUFACTURING OR ASSEMBLING OF ANY ITEM OR COMMODITY TAX BASED ON NUMBER OF EMPLOYEES INCLUDING OFFICE WORKERS AND OWNERS.

PLEASE CHECK THE FOLLOWING ITEMS BELOW WHICH APPLY TO YOUR BUSINESS:

- |                            |                           |                                    |
|----------------------------|---------------------------|------------------------------------|
| _____ AGR. MACHINERY       | _____ CHAIN STORE         | _____ MEATS, EXCLUDING CANS        |
| _____ AMMUNITION           | _____ CLOTHING RENTAL     | _____ MOBILE HOMES                 |
| _____ ANTIQUES             | _____ COAL                | _____ MOTORCYCLES                  |
| _____ AUTOMOBILES          | _____ COTTON BROKER       | _____ MUSIC/PINBALL MACHINES       |
| _____ AUTOMOTIVE EQUIPMENT | _____ DIRECT. & MAPS      | _____ MECHANICAL RIDES             |
| _____ AWNINGS & TENTS      | _____ FERTILIZER          | _____ PISTOLS                      |
| _____ BAKERY MANUFACTURING | _____ FLORIST             | _____ RADIO'S, TV'S                |
| _____ DIST. AND/OR SELLING | _____ FUEL & LUBE         | _____ MUSICAL INSTRUMENTS          |
| _____ BICYCLES & SUPPLIES  | _____ FRUITS & VEGETABLES | _____ PEANUTS/POPCORN              |
| _____ BOOKSTORE            | _____ FURNITURE           | _____ ROASTERS                     |
| _____ BRICK                | _____ ICE CREAM           | _____ SEAFOOD                      |
| _____ BUILDING MATERIALS   | _____ JEWELRY             | _____ SERVICE STATION              |
| _____ CANDY & CONFECTION   | _____ MACHINERY           | _____ SODA FOUNTAIN (NO CARB. ARM) |
| _____ TOBACCO              | _____ WEAPONS             | _____ SOFT DRINKS                  |

OTHER (PLEASE SPECIFY EXACT OPERATION): \_\_\_\_\_

TOTAL AMOUNT DUE \$ \_\_\_\_\_

“BY SIGNING THIS APPLICATION, IT IS UNDERSTOOD BY THE APPLICANT THAT THE ISSUANCE OF A PRIVILEGE LICENSE HEREUNDER DOES NOT CONSTITUTE ACCEPTANCE OR APPROVAL OF THE USE OF THE ABOVE NAMED LOCATION AS HAVING COMPLIED WITH EXISTING BUILDING CODES OR FIRE PROTECTION CODES. A LICENSE SHALL REMAIN FULLY LIABLE AND RESPONSIBLE FOR BRINGING THE PREMISES IN CONFORMITY WITH ALL APPLICABLE CITY AND STATE CODES.”

I solemnly swear or confirm that the statements made in the foregoing application are true to the best of my knowledge and belief.

FIRM NAME: \_\_\_\_\_ BY: \_\_\_\_\_  
TITLE

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

ZONING: \_\_\_\_\_ APPROVED \_\_\_\_\_ DENIED

SIGNED: \_\_\_\_\_ DATE \_\_\_\_\_  
ZONING ADMINISTRATOR