



Application for Business License

Tell us about you:

Applicant _____
Date of Birth ____/____/____ Driver's License/ID# _____ State _____
Mailing Address _____
City _____ State _____ Zip _____
Phone _____ Email _____

Tell us about your business:

Business Name _____
Street Address _____
Mailing _____ PO Box # _____
City _____ State _____ Zip _____
Business Type _____ Secondhand Property Dealer? _____
Phone _____ Email _____
Property Owner (if other than applicant) _____
Sq. Ft. of Building for Business: _____ No. of Parking Spaces _____
Applicant Signature: _____ Date _____
Property Owner Signature: _____ Date _____
(If different from applicant)

Important Notice Regarding Signs: *Any new signs or alterations of existing signs may need a separate sign permit.*

Refer to the Winston Municipal Code, Title XI; Chapter 110; Sections 110.01 – 110.99, and Chapter 112; Sections 112.01 – 112.99. View it 24/7 at www.WinstonCity.org under the Government tab, or in person at City Hall weekdays, 201 NW Douglas Blvd. (541) 679-6739 for info.

*******STAFF USE ONLY*******

LICENSE # _____

Business Location _____ Zoning _____

Change of Occupancy **Y N** Sign Permit Required **Y N**

Planning Official _____ Date _____

Comments:

Police Chief _____ Date _____

Recommendation: Grant Deny 2nd Hand Dealer **Y N**

Comments:

City Recorder _____ Date _____

Billing Clerk _____ Date _____

Fee \$50 Receipt # _____ CC _____ Letter/Label Entered/Mailed

Additional Remarks:

