

## **Application for**

## **Business License**

Business Name:			
Owner/Agent:	Date of Birth		
Driver's License/ID#: State: _	Phone		
Business Location:			
Business Mailing Address:			
City:	State:	Zip:	
Business Phone:	Email:		
Scope of Business:			
Business Type:			
<ul> <li>Permanent (Business addressed and/ Sq. Ft. of Building for Business:</li> </ul>			
<ul> <li>Contractor/Mobile Vendor (Business of within city limits)</li> </ul>	established outside city li	mits but conducting work	
Complete the following where applicable,	and sign below:		
CCB#: DC Health Dept:	Other:		
Current/Upcoming Projects (Input N/A if none):			
Annilia ant Cinnactores	<b>.</b>	N-4	
Applicant Signature:	L	vaic	

**Development Notice:** 

The issuance of a Winston Business License does not authorize construction outright. Specific projects including, but not limited to, property development, signage, building projects, home construction, solar projects, and fencing require case specific reviews conducted by the City of Winston.

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 the City Website under the Government tab, or in person at City Hall weekdays, 201 NW Douglas Blvd. (541) 679-6739 for info.

<b>Applicati</b>	on #	-

## \*\*\* STAFF USE ONLY \*\*\*

	LICENSE #	
Business Location		Zoning
Change of Occupancy <b>Y N</b>	Sign Permit Required <b>Y N</b>	2 <sup>nd</sup> Hand Property Dealer <b>Y N</b>
Comments:		
Police Chief		Date
Recommendation: O Gr Comments:	rant O Deny	
		Date
Billing Clerk		Date
City Recorder		Date
Fee \$50 Receipt #	CC	Letter/Label O Entered/Mailed O
Additional Remarks:		

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