

TOWN OF ECLECTIC

LIC#____

	January	1st	Delinquer	nt: Februa	ry 1st
NAME:			☐ CHECK HER	E FOR MAILING AI E FOR PHYSICAL A E IF BUSINESS IS C	DDRESS CHANG
FEIN/SSN Physical Address			Contact Telephone #		
<u> </u>			DESCRIPTION OF BUSINESS:		
	MAKE	CHECKS PAYABI	LE TO: TOWN OF P.O. BOX 2		
		discrepancies regarding	g the schedules or amour or (334) 541-3581.	nts below, please review	the entire license
purchase a busines		e normal rates if applica	cipality limits. Businesses	s located in the police ju	risdiction are subject t
ense Number AICS)	Schedule	Gross Receipts / Sq Footage	Per Unit if applicable	Penalty/Interest	License Fee Due
				Issuance Fee	\$12.00
				TOTAL	
ereby swear that the receipts as required the receipts as required the receipts as true and the receipts are receipts.	he amount of capita ed for disclosure in e, correct, and com	al invested or value o order to obtain a bu plete. I understand	15% penalty due March of goods, stocks, furn isiness license has b issuance of license d th all applicable laws	niture and fixtures of een examined by me loes not permit busi	r amount of sales e and to the best o
Cianad		Date		Title	
Signed					
DUE TO RECE	ND RETURN ALL	REQUIRED DOCU	RAL LAWS, PLEAS IMENTS. OMITTIN IE ISSUANCE OF Y	G TO RETURN ALI	L REQUIRED

Receipt # _____ By ____