

TOWN of EDMONSTON

5005 52ND AVENUE
EDMONSTON, MARYLAND 20781
(301) 699-8806

BUSINESS LICENSE RENEWAL APPLICATION

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An application for renewal of a Business License is required pursuant to the authority of the Code of Ordinance; Chapter 28 – Paragraph 28-3. **Form and term of license; Determination of Fees.** This ordinance requires that Business Licenses be renewed each year as adopted by the Mayor and Town Council.

This application is for the Town fiscal year beginning on _____ and ending on _____

This application must be **completed**, in its **entirety**, **signed and returned** with the total amount of \$ _____ which will be assessed by the Code fee schedule. Please make checks payable to the TOWN OF EDMONSTON. A license will be mailed or delivered to the address shown as the business address.

OCCUPANT INFORMATION

DATE OF APPLICATION: _____

BUSINESS NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ TELEPHONE: _____

NATURE OF BUSINESS: _____

PRIMARY CONTACT PERSON: _____

TELEPHONE: _____ Alt. PHONE: _____

PROPERTY OWNER, if Leased: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ TELEPHONE: _____

EMERGENCY CONTACT: _____

TELEPHONE: _____ Alt. PHONE: _____

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OCCUPANT INFORMATION : For Emergencies

1. EMERGENCY CONTACT: _____

ADDRESS: _____

TELEPHONE: _____ Alt. PHONE: _____

2. EMERGENCY CONTACT: _____

ADDRESS: _____

TELEPHONE: _____ Alt. PHONE: _____

3. EMERGENCY CONTACT: _____

TELEPHONE: _____ Alt. PHONE: _____

GENERAL INFORMATION

BUSINESS HOURS: _____ NUMBER OF EMPLOYEES: _____

NUMBER OF VEHICLES: Cars _____ Trucks _____

DO YOU EMPLOY GUARDS: DAY _____ NIGHT _____

DO YOU PROVIDE NIGHT LIGHTS: _____ BURGLAR ALARM: _____

FIRE ALARM SYSTEM: _____ SPRINKLERS: _____

LIST "HAZARD" STORAGE: _____

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I, _____, hereby certify by signing this applications that:
PRINT NAME OF APPLICANT

1. THE BUSINESS, TRADE, PROFESSION OR CALLING IS A CORPORATION IN GOOD STANDING IF THE APPLICANT IS DOING BUSINESS AS A CORPORATION. I HAVE PROVIDED THE TOWN CLERK WITH THE STATE OF INCORPORATION, ADDRESS PRESENTLY DOING BUSINESS AND THE NAME AND ADDRESS OF THE OFFICERS AND RESIDENT AGENT, IF APPROPRIATE.
2. THE APPLICANT IS IN POSSESSION OF A VALID USE AND OCCUPANCY PERMIT, ISSUED BY PRINCE GEORGE'S COUNTY, TO CARRY ON THE BUSINESS, TRADE OR PROFESSION, AT THE IDENTIFIED PREMISES AND HAVE PROVIDED THE TOWN CLERK WITH A COPY.
3. THE APPLICANT POSSESSES A VALID STATE LICENSE IF THE BUSINESS, TRADE OR PROFESSION IS ONE WHICH IS ALSO LICENSED BY THE STATE OF MARYLAND.
4. THE APPLICANT HAS PAID ALL APPLICABLE REAL ESTATE AND PERSONAL PROPERTY TAXES.
5. THE APPLICANT IS IN COMPLIANCE WITH ALL STATE OF MARYLAND, PRINCE GEORGE'S COUNTY LAWS, AND TOWN OF EDMONSTON MUNICIPAL ORDINANCES WHICH GOVERN THE CONDUCT OF THE BUSINESS, TRADE OR PROFESSION SOUGHT TO BE LICENSED, WITHIN THE TOWN OF EDMONSTON.

Licenses granted under the terms of this Ordinance may be assigned or transferred, on application, upon the conditions applicable to the granting of the original license. The Town Clerk shall issue a certificate of such assignment or transfer upon the payment of a fee of Ten Dollars (\$10.00)

A copy of the Code of the Town of Edmonston concerning licensed occupations and business licenses is available upon request.

Name & Title of Person completing Application (Please Print or Type) SIGNATURE

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TO BE USED BY THE CLERK OF THE TOWN OF EDMONSTON ONLY

FEE: _____ DATE PAID: _____ U&O PERMIT: _____ DATE: _____

FISCAL YEAR: _____

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