Unified Government Cusseta-Chattahoochee County 215 McNaughton St. Cusseta, GA 31805

Phone: (706) 989-3602 Fax (706) 989-2005

REQUEST/RENEWAL FORM BUSINESS LICENSES ON FT BENNING

Business Name:			
Nature of Business			
Federal Identification/ Social Security #			
Physical Business Address	City	State	Zip
Business Mailing Address:	•		
(If different from above)	City	State	Zip
E-mail Address:			
Business Phone#:() Busi			
Contact Person:	Contact #: ()	
ct type of ownership and complete the inform	ation required.		
ranchise			
chise Ownerdent/CEO Name			
chise Owner			
chise Ownerdent/CEO Name		Zip Code	
chise Ownerdent/CEO Nameess		Zip Code	
chise Ownerdent/CEO Nameess		Zip Code	
chise Owner		·	

Please complete and sign reverse side of form

☐ Owner					
Name:	- Social Security Number				
Address					
City	State	Zip Code			
Phone#:()					
☐ Partnership					
Name:	Social Se	Social Security Number			
Address					
City	State	Zip Code			
Phone#:()					
Name:	Social Se	Social Security Number			
Address					
City	State	Zip Code			
Phone#:()					
Will this business be based and operate	ed out of your home?	Yes	No		
Will this business be excluding patrons under 18 years of age? If answered Yes, please explain:		Yes	No		
Will this business be adult oriented?		Yes	No		
Will this business be sell alcoholic bev	verages or allow them to be				
consumed on premises?	·	Yes	No		
I hereby attest that the above inform	nation is true and correct t	to the best of my knowledg	e .		
Print Name		Title			
Signature		Date			

Fees:

Flat Fee for calendar year (Includes \$50.00 Administrative fee) \$200.00

Service charge to change name on already issued licer	nse\$10.00
New business starting up after July 1st prorated ½ for	remainder of year
(Includes Administrative fee of 50.00)	\$125.00