City of Huntsville
PO Box 549
Huntsville, AR 72740

BUSINESS LICENSE APPLICATION
2024-2025
Valid August 1 to July 31

«Label Permit Name»
«Mailing Address»
«Mailing City», «Mailing State» «Mailing Zip»

1) **Please return before July 20, 2024.**

2) **The city can only accept check or cash payments.**

3) **License shall be displayed at business location.**

4) **Mobile food vendors are required to provide a copy of current Ark. Dept. of Health certificate, with application.**

5) **Renewal forms for 2025-26 year will be sent to <u>mailing address</u> late June 2025.**

Date _____ Name of Business _____
*Name as you will do business with the public

Owner Name(s) (Or Contact Name if Corp.) _____ Contact Phone _____
For City Use Only

Business Phone No. _____ Type of Business _____

Mailing Address _____ City, State & Zip _____

Physical Business Address _____ City, State & Zip _____

Mail License to:
*Only if different from mailing address _____ City, State & Zip _____

Signature _____

Check One	FEE SCHEDULE	
	Non-Profit Status **(No Application Req.)**	$ 0
☐	Owner & 1 Employee	$ 30
☐	2-10 Employees (Full or Part-time)	$ 50
☐	11-50 Employees (Full or Part-time)	$ 75
☐	50+ Employees (Full or Part-time)	$ 100

Thank you for operating your business in the city of Huntsville.

Include your business on our website!

• We are creating a <u>new page</u> on our website to list any businesses that operate in the City of Huntsville. If you wish to be included on the new page, please indicate below.
• Please list the exact name of your social media accounts and web-site address.

☐ Yes, add my business. I have listed my links below.

☐ No, I do not wish to be listed on website.

My Website Address	
My Facebook Page	
My Instagram Name	

Mail application and check to:

CITY CLERK'S OFFICE
PO BOX 549
HUNTSVILLE, AR 72740

FOR OFFICE USE ONLY	LICENSE #	DATE RECEIVED
	CHECK #	UPDATED
	CASH $ Int.	