

Oglethorpe County Business License Registration

GOVERNMENT USE ONLY

TAX YEAR _____

CUSTOMER NUMBER _____

NAICS CODE _____

DATE _____

PROCESSED BY _____

Business Name _____

Physical Address _____

Business Mailing Address _____

Phone _____ Email _____

Business Type ___ Corporation ___ LLP ___ Partnership ___ LLC ___ Sole Owner ___

Type Of Registration

New _____ Date Opened _____ Renewal _____

Termination _____ Date Closed _____

Federal Tax ID Number _____

Is business located in your home? Yes ___ No ___

Describe nature of business

Owners and/or Officers Information

Name/Title _____ Name/Title _____

Applicant Signature(s) _____ Date _____