



APPLICATION FOR OCCUPATIONAL LICENSE 2024

All businesses are required to submit a notarized SAVE affidavit, business with ten (10) or more employees must also submit a notarized E-Verify affidavit. Renew by Dec 31st to avoid penalties

Company Name: _____

Contact: _____

Business Address: _____

Mailing Address: _____

Email Address: _____

City, State, Zip: _____

Phone Number: _____

Fax Number: _____

Type of Business: _____

SAVE Affidavit: ___ Yes or No E-Verify: ___ Yes or No Number of employees ___

Type of Organization: Sole owner___ Partnership___ Corporation___ LLC___

NOTE: PROOF MUST BE PROVIDED FOR ANY APPLICABLE ITEMS CHECKED.

I (we) certify that the information for my business or profession as reported herein is true and correct and that I am familiar with the county ordinance providing for penalties and revocation of my (our) license for making false or fraudulent statements in this application.

Applicant's signature and date