

Planning & Development

305 Millers Crossing Harker Heights, TX 76548

Phone: (254) 953-5600

APPLICATION MUST BE FULLY COMPLETED OR WILL NOT BE ACCEPTED

BUSINESS REGISTRATION FORM

- 1. Copy of DBA (Doing-Business-As), LLC or Articles of Incorporation.
- 2. Payments: Home Based & Property Management \$25.00 **Mobile Business - \$35.00**

Commercial - \$75.00

- 3. Fire Marshal Walk-Through Call (254) 699-2688 to schedule.
- 4. Building Walk-Through Call (254) 953-5648 to schedule.
- 5. Bell County Food Permit Call (254) 771-2106

	DATE:	
NAME OF BUSINESS:	PHONE # OF BUSINESS:	
LOCATION OF BUSINESS:		
MAILING ADDRESS (if different than location):		
TYPE OF BUSINESS (detail description):		
Texas Sales Tax ID #: E-Mail (Primary	·	
Business Owner:		
Date of Birth: Home Address:	Home Address:	
Phone #: Driver Lie	cense #:	
Manager:		
Date of Birth: Home Address:		
Phone #: Driver Lie	Driver License #:	
Emergency Contact:		
Phone #: Address:		
Security Lighting on Premise?		
Alarm System? YES NO N/A	YES: Silent Audible Fire Intruder	
Subscribe to Security Service? YES NO N/A		
Security Service Company Name:	Phone #:	
Building Owner (if different from bus. owner) Phone #:		

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BUSINESS REGISTRATION FORM

VEHICLE INFORMATION: PLEASE LIST INFORMATION ON OWNER AND EMPLOYEE(S) AS WELL AS VEHICLES THAT MAY BE ON THE BUSINESS PREMISE AT <u>ODD HOURS</u>.

DRIVER	VEHICLE (MAKE, MODEL, AND YEAR)	LICENSE PLATE #	
Hazardous Material on Premise? YES	□ NO □ N/A		
f YES, list items (attach separate sheet if need	ed):		
_			
Does Building Have Exterior Electrical Shut Of	f? YES NO If YES, on which side	? North South East West	
s the building equipped with automatic Fire	Sprinklers? YES NO		
Are street address numbers installed on build	ing? YES NO If YES, are they y	risible from the street? YES NO	
Will this business require: Commercial			
	·		
Date Business Opens Under New Owner:	No. of Employees:	Business Hours:	
Type of Business (select one or provide "othe Partnership, Limited Partnership, Corporation	•		
WARNING : A person commits an offens false statement under oath or swears to the tr aw to be made under oath.	e, with intent to deceive and with knowledg ruth of a false statement previously made and		
Before me, the undersigned authority, this da		, known to me to	
oe the person whose name if subscribed to the path says that he/she has read the said form it personal knowledge of all the information set	n its entirety, together with any supporting c	documentations, that he/she has	
Applicant's Signature	Notary Public, State	of Texas	
		SWORN AND SUBSCRIBED BEFORE ME THIS,	
	DAY OF,	20	
	CTAFF ONLY DO NOT FUL OUT		
	STAFF ONLY DO NOT FILL OUT		

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