

Account # _____

City of North Little Rock

Please mail application and fees to:
Diane Whitbey
City Clerk and Treasurer
PO Box 5757
North Little Rock, AR 72119

Type _____

BUSINESS LICENSE APPLICATION

To be completed by City Clerk's office

Questions? Call 501-975-8617

APPLICATION FOR BUSINESS LICENSE

Date: _____, 20____

New Business ___ Change of Ownership ___ Name Change ___ Address Change ___ Existing ___

Corporation ___ Limited Liability Company (LLC) ___ Sole Proprietorship ___ Other ___

Name of Business _____

Physical Address _____ City _____

Business Telephone # _____ State _____ Zip Code _____

Mailing address if different than business location _____

City _____ State _____ Zip Code _____

Business Email or web address _____

Description of Operations _____

Business started: Month _____ Year _____ Number of employees _____

Owner/Highest Officer's Name (Printed) _____

Driver's License # _____ (Attach color copy) Telephone # _____

Owner/Highest Officer's Home Address _____

City _____ State _____ Zip Code _____

Co-Owner/Second Highest Officer's Name (Printed) _____

Telephone # _____ Email _____

Is this business an out of State/City Contractor? Yes ___ No ___

Does this business sell any type of prepared food or beverage? Yes ___ No ___

Does this business sell any type of alcoholic beverages? Yes ___ No ___

Is this business going to be operated out of your home? Yes ___ No ___

Business property owned? ___ Or Leased? ___ If leased, please provide property owner's information

Property owner's Name _____ Telephone # _____

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Inventory

Does this business maintain inventory? Yes ___ No ___
If yes, list your average monthly inventory amount below.
If no, Please skip this section and sign below.

Average Inventory Amount \$ _____

**A FALSE STATEMENT OR MISREPRESENTATION MAY MAKE THE LICENSE
NULL AND VOID AND CONSTITUTE FOREFEITURE OF PAID FEES**

I certify that all information stated is true and accurate to the best of my
knowledge and belief.

Signed _____
Owner or Authorized Representative

**ALL FEES ARE SUBJECT TO VARIABLES/PRO-RATING/ ETC.
PLEASE CONTACT THE CITY CLERK'S OFFICE FOR FINAL
BUSINESS LICENSE FEE QUOTES BEFORE SENDING PAYMENT.
ALL LICENSE FEES ARE NON-REFUNDABLE & BASED ON
APPROVAL OF CITY CLERK.**

Optional Information:

Is this business Minority Owned? Yes ___ No ___ (If yes, please check type below)

Black American (BL) ___ Asian Indian American (AI) ___ Asian Pacific American (AP) ___

Native American (NA) ___ Hispanic American (HI) ___ Hasidic Jewish American (HS) ___

Small Business Owned? Yes ___ No ___

Woman Owned? Yes ___ No ___

Revised December 2014: cityclerkdailyreport forms petitions Business License