



**APPLICATION**  
**FOR BUSINESS OR PROFESSIONAL LICENSE**

**ACCOUNT#:** \_\_\_\_\_ **FED ID#:** \_\_\_\_\_

**TOE ID#:** \_\_\_\_\_ **STATE ID#:** \_\_\_\_\_

**NAME OF APPLICANT:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**BUSINESS LOCATION:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**NAME OF OWNER:** \_\_\_\_\_

**TYPE OF BUSINESS:** \_\_\_\_\_

**LICENSE FEE:** \_\_\_\_\_ **DATE PAID:** \_\_\_\_\_ **METHOD:** \_\_\_\_\_

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**Signature and Title of Applicant or Representative**