

PLEASE READ THE FOLLOWING INFORMATION CONCERNING THE COMPLETION OF THIS FORM

PLEASE COMPLETE ALL AREAS OF THE FORM EXCEPT FOR THE SHADED AREA AT THE BOTTOM.

FORM SHOULD BE TYPED OR PRINTED LEGIBLY

FORM SHOULD BE DATED AND SIGNED BY AN OWNER, PARTNER, OR OFFICER OF THE BUSINESS

FORM WILL INITIATE THE PROCESS FOR REGISTERING YOUR BUSINESS WITH THE MUNICIPALITY

==> IF YOUR BUSINESS WILL HAVE A PHYSICAL LOCATION WITHIN THE MUNICIPALITY, PLEASE USE THAT ADDRESS ON THE FRONT OF THIS FORM. (Complete separate forms for each physical location in the City.)

==> UPON RECEIPT OF THE COMPLETED FORM, THE MUNICIPALITY WILL PROVIDE ANY ADDITIONAL FORMS AND INFORMATION REGARDING OTHER SPECIFIC REQUIREMENTS TO YOU IN ORDER TO COMPLETE THE LICENSING PROCESS.

ALL LICENSE RENEWALS ARE DUE JANUARY 1 AND DELINQUENT AFTER JANUARY 31, WITH THE FOLLOWING EXCEPTION:

INSURANCE COMPANY LICENSE: DUE JANUARY 1, DELINQUENT AFTER MARCH 1

THIS FORM IS INTENDED AS A SIMPLIFIED, STANDARD MECHANISM FOR BUSINESSES TO INITIATE CONTACT WITH A MUNICIPALITY CONCERNING THEIR ACTIVITIES WITHIN THAT CITY. A BUSINESS LICENSE WILL BE REQUIRED PRIOR TO ENGAGING IN BUSINESS. IF A BUSINESS INTENDS TO MAINTAIN A PHYSICAL LOCATION WITHIN THE CITY, THERE ARE NORMALLY ZONING AND BUILDING CODE APPROVALS REQUIRED PRIOR TO THE ISSUANCE OF A LICENSE.

IN CERTAIN INSTANCES, A BUSINESS MAY SIMPLY BE REQUIRED TO REGISTER WITH THE CITY TO CREATE A MECHANISM FOR THE REPORTING AND PAYMENT OF ANY TAX LIABILITIES. IF THAT IS THE CASE, YOU WILL BE PROVIDED THE MATERIALS FOR THAT REGISTRATION PROCESS.

THE COMPLETION AND SUBMISSION OF THIS FORM DOES NOT GUARANTEE THE APPROVAL OR SUBSEQUENT ISSUANCE OF A LICENSE TO DO BUSINESS. ANY PREREQUISITES FOR A PARTICULAR TYPE AND LOCATION OF THE BUSINESS MUST BE SATISFIED PRIOR TO LICENSING.

SHOULD THERE BE ANY QUESTIONS CONCERNING THE COMPLETION OF THIS FORM OR THE LICENSING AND/OR REGISTRATION PROCESS, PLEASE CALL THE NUMBER ON THE FRONT OF THIS FORM TO OBTAIN A MORE DETAILED EXPLANATION.

Only Complete this form if your business is located inside the City Limits of Calera

**CITY OF CALERA
FIRE / POLICE EMERGENCY INFORMATION SHEET**

The Fire and Police Departments need this information for emergency responses to your business. Please complete this form as accurately as possible. It will aid the response time if your 911 address is posted on the exterior of your business where it is visible from the street.

Name of Business _____ Date _____
Physical Address _____
Mailing Address _____ City _____
State _____ Zip Code _____ Phone _____
Type of Business _____
Owner Name _____
Address _____ City _____
State _____ Zip Code _____ Phone _____

EMERGENCY CONTACT INFORMATION (LOCAL)

1. Name _____ Phone _____
Position _____ Key Holder _____ Yes _____ No _____
Address _____ City _____
State _____ Zip Code _____ Cell / Pager _____

2. Name _____ Phone _____
Position _____ Key Holder _____ Yes _____ No _____
Address _____ City _____
State _____ Zip Code _____ Cell / Pager _____

BUSINESS LOCATION INFORMATION

Is there a Fire Alarm? _____ Yes _____ No _____
Fire Alarm Service Provider _____ Phone _____
Monitoring Provider _____ Phone _____
Sprinkler Provider _____ Phone _____
If Hazardous Materials are stored on the premises please list: _____

Is there a Burglar Alarm? _____ Yes _____ No _____ Is there a Robbery Alarm? _____ Yes _____ No _____
Burglar Alarm Service Provider _____ Phone _____
Property Insurance Agent _____ Phone _____
Knox Box _____ Yes _____ No _____ Numbers of Elevators on the Property _____