



APPLICATION FOR A **NEW** GENERAL BUSINESS LICENSE WITH THE CITY OF GARY

NEW BUSINESS APPLICATION CHANGE OF ADDRESS, BUSINESS NAME, NEW EIN, OR BUSINESS OWNER CURRENT LICENSE # : GBL - -

BUSINESS INFORMATION

BUSINESS NAME (DBA) FEDERAL EMPLOYMENT I.D. NUMBER (EIN)

PHYSICAL BUSINESS ADDRESS CITY STATE ZIP

BUSINESS PHONE BUSINESS WEBSITE (URL)

THE BUSINESS/BUSINESS OWNER:

OWNS THIS PROPERTY RENTS THIS PROPERTY GROSS FLOOR AREA OCCUPIED BY BUSINESS (SQUARE FEET) BUSINESS OPENING DATE (MM/YYYY) Provide the Zoning Department with proof of ownership or lease agreement and written permission by the owner to operate the business on the property

HOURS OF OPERATION:

Table with 8 columns: MONDAY, TUESDAY, WEDNESDAY, THURSDAY, FRIDAY, SATURDAY, SUNDAY and 1 row: OPEN TO CLOSE

LOCATED ON A RESIDENTIAL PROPERTY? YES NO ALL WORK PERFORMED OFF-SITE (e.g. Contractors, Transportation)

BUSINESS TYPE (Check one. Business types in bold may require an additional license or review):

SOLE PROPRIETER LLC/CORPORATION PARTNERSHIP NONPROFIT OTHER

Grid of business categories with checkboxes: Accommodations, Adult/Sexually Oriented Business, Animal Care, Architecture, Art, Automotive Sales, Automotive Service, Bar or Restaurant, Beauty/Health/Wellness, Construction or Contractors, Child or Elder Care, Education or School, Entertainment, Farm, Orchard, or Nursery, Financial Institution, Fitness/Recreation, Food or Beverage Production, Information Systems, Landscaping, Laundry or Cleaning, Legal or Financial, Manufacturing or R&D, Medical/Dental Care, Office - General, Pharmacy, Printing or Publishing, Professional/Business Support, Real Estate, Religious or Charitable, Rental/Repair of Equipment, Retail - General, Retail - Second Hand, Social Assistance, Storage, Truck Services, Wholesale Processing or Distribution, Waste Management or Recycling, Other (Please specify)

WASTE DISPOSAL: By ordinance, all businesses operating in the City of Gary shall have their garbage placed in a private refuse container and removed at the expense of the business by a private disposal company, and must have a plan to recycle or otherwise reduce waste.

NAME OF DISPOSAL AND RECYCLING COMPANY (If business is not located in Gary, write N/A)

HAZARDOUS MATERIALS: Will any hazardous materials be stored on the premises? YES NO

NATURE OF HAZARDOUS MATERIALS (If no hazardous materials will be stored on site, write N/A)

**BUSINESS OWNER INFORMATION**

OWNER NAME OR COMPANY NAME IF LLC \_\_\_\_\_ OWNER PHONE \_\_\_\_\_

OWNER HOME ADDRESS (NO P.O. BOX) \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

OWNER DATE OF BIRTH (MM/DD/YYYY) \_\_\_\_\_ CONTACT EMAIL \_\_\_\_\_

**BILLING PARTY INFORMATION** (If different from above)

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

NAME \_\_\_\_\_ 24 HOUR PHONE \_\_\_\_\_

**FEES** – General Business Licenses are valid until the end of the calendar year and are renewed annually. The general business license renewal fee is \$100. No fees are charged for nonprofit organizations with valid 501(c)(3) paperwork.

Late fee schedule (if applicable)

	Business starting with first letter A-K	Business starting with first letter L-Z	Itemized license fee	Total license fee
Renewal due date	Jan. 31	Feb 28(29)	\$100	\$100
Late 1-120 days	Feb. 1 - May. 31	Mar. 1 - Jun. 28	\$35	\$135
Late 121-240 days	Jun. 1 - Sept. 28	Jun. 29 - Oct. 26	\$50	\$150
Late 241-365 days	Sept. 29 - Jan. 30	Oct. 27 - Feb 27(28)	\$75	\$175
over 1 year			\$115	\$215
each additional year over 1 year			\$40 per year over 1 year	\$215 + \$40 per year over 1 year

**SIGNATURE**

I certify to the best of my knowledge that all the forgoing information is true and correct as provided.

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE (MM/DD/YYYY) \_\_\_\_\_

**FOR INTERNAL USE ONLY:** PARCEL # \_\_\_\_\_ ZONING CODE \_\_\_\_\_

DESCRIPTION OF PERMITTED USES \_\_\_\_\_

ZONING CONFIRMS PERMITTED USE AND READY FOR INSPECTION \_\_\_\_\_ DATE \_\_\_\_\_

BUILDING INSPECTION FEE PAID \_\_\_\_\_ PAYMENT METHOD: \_\_\_\_\_ DATE \_\_\_\_\_

BACKGROUND CHECK DATE \_\_\_\_\_ BUILDING INSPECTION DATE \_\_\_\_\_ FIRE INSPECTION DATE \_\_\_\_\_

*Note: Background checks provide consumer protection against fraud, et.al.*

INSPECTIONS COMPLETE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

GBL - \_\_\_\_\_ AMOUNT PAID: \_\_\_\_\_ PAYMENT METHOD: \_\_\_\_\_

FINANCE REVIEWED BY: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_