

**CITY OF GREENDALE
GREENDALE, IN 47025
APPLICATION FOR MERCHANDISING/BUSINESS LICENSE**

**PROPOSED NAME OF
BUSINESS:** _____

**STREET ADDRESS OF PROPOSED
BUSINESS:** _____

**NAMES/ADDRESSES OF ALL OWNER, PARTNERS, RESIDENT AGENT, OFFICER(S) OF
CORPORATION (USE ATTACHMENTS AS NEEDED):**

**NATURE OF PROPOSED
BUSINESS:** _____

**NAMES/LOCATIONS OF ALL OTHER BUSINESSES OWNED OR PREVIOUSLY OWNER BY
APPLICANT(S) (USE ATTACHMENTS AS NEEDED):**

**STATEMENT AS TO ANY CONVICTIONS INVOLVING ILLEGAL OPERATION OF
MERCHANDISING LICENSE ESTABLISHMENT OF
APPLICANT(S)** _____

**AUTHORIZED
SIGNATURE:** _____

PRINT: _____

**SIGNATOR
ADDRESS:** _____

TELEPHONE: _____

**EMAIL
ADDRESS:** _____

**TITLE/RELATIONSHIP TO PROPOSED
BUSINESS:** _____

INTERNAL USE ONLY

APPLICATION FEE \$50.00

DATE PAID: _____

APPROVAL:

CODE ENFORCEMENT

DATE APPROVED: _____

CITY COUNCIL:

DATE PASSED: _____

**CITY OF GREENDALE
NEW BUSINESS QUESTIONNAIRE**

BUSINESS OWNER INFORMATION:

NAME: _____
ADDRESS: _____
TELEPHONE NO.: _____
MOBILE NO: _____
EMAIL ADDRESS: _____

BUSINESS INFORMATION:

BUSINESS NAME: _____
BUSINESS ADDRESS: _____
BUSINESS TELEPHONE NO.: _____
BUSINESS EMAIL ADDRESS: _____
BUSINESS WEBSITE ADDRESS: _____

BUSINESS DESCRIPTION (DETAILED): _____

FACILITIES (GREENDALE CODE-CHAPTERS 50-54 & CHAPTER 155):

NEW CONSTRUCTION ☐
PURCHASE EXISTING ☐
LEASE EXISTING ☐

SIGN REQUIREMENTS (GREENDALE CODE-CHAPTER 156):

TYPE/STYLE: _____
SIZE: _____
LOCATION ON SITE: _____
NEW ☐
EXISTING ☐
ALTER ☐
REPLACE ☐

PLEASE INCLUDE ANY OTHER INFORMATION WHICH MAY ASSIST US IN UNDERSTANDING
YOUR PROJECT INCLUDING PLAN, MAPS, PHOTOS, LAYOUTS, ETC.

Applicant Signature

Date

Co-Applicant Signature

Date

NOTE: PLEASE USE ADDITIONAL PAGES AS NEEDED TO COMPLETE ANSWERS