



OCCUPATIONAL LICENSE APPLICATION (New business)

Please bring Original, ONE copy of Articles of Incorporation, Health Permit, Lease Agree. and Liquor License receipt (IF applicable) with this application. (Non-Refundable Application Fee \$50.00)

OFFICE USE ONLY

Administrative Regular
Police ABO Check YES NO
Account No.
Account Type:
Industry Type:

IMPORTANT - PLEASE

Provide your E-mail address: Date of Application:

LICENSE WILL NOT BE PROCESSED IF APPLICATION IS INCOMPLETE (PLEASE TYPE OR PRINT)

Proposed Business Address: Lease Own (Attach copy) (Zoning Classification)

(Trade Name of Proposed Business)

Type of Ownership: Individual Partnership Corporation Change of Ownership or Address

Number of Employees: Available Off-Street Parking spaces Type of Parking Surface: Concrete Blacktop Shell/Gravel

Applicant's full name Applicant's Date of Birth (DOB) Applicant's Address City State Zip Code Applicant's Contact Numbers Applicant's Driver's License No. State Applicant's Social Security No. Renting? Property Owner/Lessor's Name Owner/Lessor's Contact Numbers

Property Owner/Lessor's Address - City State Zip Code Will this Business Require Changes to Building Signs Building Modifications Construction Electrical Work Plumbing Work

If YES, describe and contact the Building Department: (Please give a detailed description of business activity)

Home Business: If checked, Provide storage location of goods, equipment, etc. Address City State Zip Code

RESTRICTIONS FOR HOME BUSINESS: NO commercial advertising NO work done on premises NO signs displayed large that 2-sq. ft. in size. NO storage on premises NO retail sales as this location Applicant's Initials:

I AFFIRM that the information given in this application IS TRUE and CORRECT:

SIGNATURE (Applicant) Title Dated

APPROVED - Licensing Officer Approval Date COMMENTS:

OFFICE USE ONLY Table with columns: SPECIAL APPROVALS, Required YES NO, Date Approved, Date Not Approved. Rows include Planning & Zoning, Code Enforcement, Jeff. Parish, LA State Fire Marshall, City of Gretna-Water Department, Building Department, Electrical, Mechanical, Plumbing.



DUE DATE JANUARY 1 BECOMES DELINQUENT MARCH 1

1. Date of Application ↓

Return To: CITY OF GRETNA
Office of Taxes & Licenses
P. O. Box 404
Gretna, LA 70054-0404

YEAR 20 _____

Month Day Year
For Official Use Only
Lic. #
Date Paid:
Amount:
Processed by:

APPLICATION AND/OR REQUEST FOR

2. OCCUPATIONAL LICENSE TAX (Check One or More):

[] New Business [] Chain Store [] Renewal [] Seasonal [] Special Event

3. FEDERAL EMPLOYER IDENTIFICATION NUMBER

4. A. STATE SALES TAX NUMBER

PARISH SALES TAX NUMBER

5. B. TRADE NAME

C. BUSINESS LOCATION (Street, State, Zip Code)

TELEPHONE NO.

E-MAIL ADDRESS

D. MAILING ADDRESS (Street, State, Zip Code)

6. TYPE OF ORGANIZATION

A. ___ Individual B. ___ Partnership C. ___ Corporation D. ___ Non-Profit E. ___ Government

7. If Corporation or partnership, Name, Title, Soc. Sec. No., Residence address and Phone No. of Officers or Partners
1) NAME TITLE Social Security No. & Driver License No. Phone No.-Area Code ()
Residence Address
2) NAME TITLE Social Security No. & Driver License No. Phone No.-Area Code ()
Residence Address
3) NAME TITLE Social Security No. & Driver License No. Phone No.-Area Code ()
Residence Address

8. If sole owner (individual) Name TITLE Social Security No. & Driver License No. Phone No.-Area Code ()
Residence Address

9. Name & Address of Agent for Service of Process 10. Location of Accounting Records are Maintained 11. If Corporation, the State of incorporation? 12. Reason for Applying

13. Date Business Started/Acquired at THIS LOCATION Month Day Year 14. Excluding this location, how many Other Business locations do you have in Jefferson Parish [] 15. Number of Employees

16. NATURE OF BUSINESS Description of Sales or Activity

I affirm that the information provided on this application are true and correct. Signature of Applicant Title Date Signature of Preparer If different from above Date

OFFICE USE ONLY
Account/Lic. #
Date Paid
Amount Paid
Date due to RETURN

Parcel No.

30 days GROSS SALES \$ X months remaining in year = \$
PAID \$ 50.00
Amount due
Penalty Fee
Interest Fee
TOTAL DUE: \$

COURTESY CHECKLIST FOR NEW BUSINESSES

WITHIN CITY LIMITS 70053 & TIMBERLANE ESTATES SUBDIVISION 70056

(Gretna City Hall Office hours: 8:00 a.m. to 4:30 p.m.)

<p><input checked="" type="checkbox"/> Federal Identification Number Call first at (800) 829-3676. When form is received, complete and fax to (901) 546-3916. You will receive your new ID number in the mail.</p>	<p>Louisiana State-Sales Tax Department 617 North 3rd Street (La Salle Building) Baton Rouge, LA 70802 Tel. No: (504) 568-5233 (8:00 AM to 4:30 PM)</p>
<p><input checked="" type="checkbox"/> City of Gretna Planning & Zoning Department Gretna City Hall, 740 2nd Street – Room 101 Gretna, LA 70053 Tel. (504) 363-1556 (504) 363-1568</p>	<p><input checked="" type="checkbox"/> Jefferson Parish Sales Tax -Sheriff's Office 1233 Westbank Expwy. (Next to Leson Chevrolet) Harvey, LA 70058 Tel No. (504) 363-5637</p>
<p>City of Gretna Inspections Department Gretna City Hall, 740 2nd Street – Room 101 Gretna, LA 70053 Inspections: Building, Electrical, Gas, Mechanical, Plumbing Tel. Nos. (504) 363-1563 or (504) 363-1564</p>	<p>City of Gretna Water Services Gretna City Hall, 740 2nd Street – Room 103 Gretna, LA 70053 Tel. No. (504) 363-1560 or (504) 363-1561</p>

***For your convenience, listed below are various agencies you may be required to contact, depending on your type of business.**

<p>Federal Government – Alcohol, Tobacco & Firearms Bureau → Tel. No. (504) 841-7000 One Galleria Blvd. – Suite 1700 Metairie, LA 70001</p>
<p>Louisiana Department of Education (Child Care Licensing) → Tel. No. (225) 342-9905 627 North Street (Corner North & Fourth Streets) Baton Rouge, LA 70802</p>
<p>Louisiana State Alcoholic Beverage & Tobacco Control → Tel. No. (504) 568-7028 1450 Poydras Street (Benson Tower) – Suite 850 New Orleans, LA 70112 (SPECIAL EVENT)</p>
<p>Louisiana State Department of Used Motor Vehicles and Parts Commission 3132 Valley Creek Drive Baton Rouge, LA 70808 Tel. No. (225) 925-3870 Toll Free: (800) 256-2977</p>
<p>Jefferson Parish (Environmental Health Services) Tel. No. → (504) 838-5140 111 N. Causeway Blvd. (Office hours: 8:00 AM – 4:30 PM) Metairie, LA 70001</p>
<p>Louisiana Office of State Fire Marshal 1450 Poydras Street (Benson Tower) – Suite 1500 New Orleans, LA 70112 New Orleans Office: Tel. No. (504) 568-8506 Fax No: (504) 568-8511</p>
<p>Gretna Police Department - Alcoholic Beverage Outlet (ABO) → Tel. No. (504) 227-7324 Traffic Department, ABO Office (Office hours: 9:00 AM – 11:00 AM --- Monday-Friday) 327 Huey P. Long Avenue Gretna, LA 70053</p>
<p>Louisiana Department of Health and Hospitals - Office of Public Health Public health department in New Orleans, Louisiana 1450 Poydras Street (Benson Tower) New Orleans, LA 70112 Phone: (225) 342-9500</p>