

Receipt # _____

**CITY OF HAMMOND, INDIANA APPLICATION For
RETAIL SALES/RETAIL FOOD LICENSE
FEE: \$100.00**

License _____

Date / /

E-mail address _____

New Business _____ Renewal _____

New Business Applicants Require a Photo ID

Business Name _____

IN Tax ID _____

Address _____

Phone # () -

City _____ State _____ Zip _____

Fax # () -

Applicant's Name _____

Phone # () -

Address _____

Date of Birth / /

City _____ State _____ Zip _____

Social Security # - -

Sole Owner _____

Partnership _____

Corporation _____

List Officers, Associates and Partners

1 _____ Date of Birth / /

Social Security # - -

Address _____

City _____ State _____ Position _____

2 _____ Date of Birth / /

Social Security # - -

Address _____

City _____ State _____ Position _____

Days Open _____

Business Hours _____

Property Owner _____

Phone # () -

Address _____

City _____ State _____

Do you have or intend to use any type of portable structure for sales? _____ Will there be a Sign? _____

Do you have or intend to use a truck trailer for storage purposes? _____ Has Remodeling been done? _____

Is Building Enclosed? _____

Dimensions of Building (SqFt) _____

Does the site have a Parking Area? _____

Is it Paved? _____ # of Parking Spaces _____

If any amusement devices, jukeboxes or arcade games are in use, an Amusement License is also required.

**LICENSES EXPIRE JUNE 30th. APPLICATION FEES ARE NONREFUNDABLE.
RENEWAL APPLICATIONS RECEIVED AFTER JULY 31 WILL BE CHARGED TRIPLE THE FEE.
LATE FEES WILL NOT BE WAIVED FOR ANY REASON.**

I hereby testify that I am familiar with the ordinances of the City of Hammond, Indiana, governing the operation of the above mentioned business, and I hereby further swear that I will not myself do, or authorize or permit any act to be done in violation of the laws of the United States of America, the State of Indiana, or the ordinances of the City of Hammond, Indiana in or about my place of operation. All the answers made by me to the foregoing questions are true and are made for the sole purpose of obtaining a license from the City of Hammond to operate a lawful business.

LIABILITY

This business license is issued upon the representations made at the time of application. All Business License applicants, by submitting this application, agree to abide and be bound by all Federal, State, and Local regulations applicable, and violation of same is grounds for termination of this license. Nothing in the granting or issuance of this license creates liability on behalf of the City of Hammond, its agents or assigns and license holder assumes all liability and responsibility for the licensed premises.

Applicant's Signature _____ Date _____

Approved by:

Zoning Dept _____

Fire Inspector _____

Building Dept _____

Police Dept _____

Health Dept _____