		-	DIANA APPLI		License
New Business	<u>v or used</u>		DEALER LIC 0.00	ENSE FEE:	Date/_/
Renewal New Business Applicants Require	e a Photo ID		E-mail A	ddress	
Business Name				IN Tax ID	
Address				Phone # () -
CityStat	e	Zip		Fax # () -
Applicant's Name				Phone # () -
Address				Date of Birth	
CityStat	e	Zip		Social Security #	<u> </u>
Sole Owner	Partne	rship _		Corporatio	on
List Officers, Associates and Partners 1	Date of Birth	/	/	Social Security #	<u> </u>
Address					Position
2					<u> </u>
Address	City			State	Position
3	Date of Birth	/	/	Social Security #	·
Address	City			State	Position
Property Owner			Phone #	<u>(</u>) -	
Address			0''		State
Days Open			Business Hours		_
If any Amusement Devices, Video A	Arcade Game	s, etc, a	re in use, an A	musement Lic	ense is also required.
LICENSES EXPIRE DECE	MBER 31 ST .	APPL	ICATION FEE	S ARE <u>NONR</u>	EFUNDABLE.
RENEWAL APPLICATIONS RE				. BE CHARGED NY REASON.	TRIPLE THE FEE.
I hereby testify that I am familiar with the ordinar I hereby further swear that I will not myself do, o State of Indiana, or the ordinances of the City of questions are true and are made for the sole purpo LIABILITY This business license is issued upon the representation.	nces of the City of lor authorize or pern Hammond, Indiana ose of obtaining a li	Hammond nit any act a in or abo cense fron	, Indiana, governing to be done in violati ut my place of opera n the City of Hammo	the operation of the a on of the laws of the ation. All the answers and to operate a lawful	United States of America, the made by me to the foregoing I business.
agree to abide and be bound by all Federal, Sta Nothing in the granting or issuance of this licens liability and responsibility for the licensed premis	ate, and Local regu e creates liability of	ulations ap	plicable, and violati	on of same is groun	ds for termination of this license.
Applicant's Signature				Date	
Zoning Dept			Fire Inspector		
Building Dept			Police Dept		