

CITY OF FRUITLAND

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spearcy@fruitland.org



BUSINESS APPLICATION FOR LICENSE

FEE: \$5.00

BUSINESS INFORMATION

Name of Business:

Business Address:

Mailing Address:

Business Phone:

Home Phone:

Fax:

E-Mail (optional):

Nature of Business:

Name of Applicant:

Applicant Address:

EMERGENCY CONTACTS

Contact Name:

Home Phone:

Cell Phone:

Contact Name:

Home Phone:

Cell Phone:

Owner or Owners Authorized Agent Signature:

Date:

OFFICIAL USE ONLY

Date Received:

Issued
 Denied

Signature:

Notes: