HINDS COUNTY
APPLICATION FOR PRIVILEGE LICENSE
FOR___/___/___ THRU ___/___/___
SENATE BILL 2081 EFFECTIVE 7-1-88

LOCATION OF BUSINESS _____

OWNERS, (AGENT): _____
_____
_____

PHONE NO: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____
_____

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BUSINESS CATEGORY
(CIRCLE ONE AND COMPLETE REQUIRED INFORMATION ON THAT LINE)

A. MANUFACTURER NO. OF FULL TIME EMPLOYEES_____

B. WHOLESALE OR RETAIL STORE VALUE OF INVENTORY: _____

C. WEAPONS DEALER

D. PAWN BROKER

E. AUTOMOBILE FOR HIRE OR RENT NO. OF AUTOS:_____

F. TRANSIENT DEALER OR VENDOR

G. OTHER BUSINESS

I DECLARE UNDER THE PENALTIES OF PERJURY, THAT THIS APPLICATION AND ALL ITS SUPPORTING DOCUMENTATION, IS TO MY KNOWLEDGE TRUE AND CORRECT.

SIGNATURE, TITLE: _____

FAILURE, REFUSAL, OR NEGLECT TO OBTAIN LICENSE PRIOR TO COMMENCING BUSINESS OR EXPIRATION OF PRESENT LICENSE MAKES PERSON LIABLE FOR TAX PLUS PENALTY OF 10% OF TAX.

RETURN TO:

EDDIE FAIR
HINDS CO. TAX COLLECTOR
P.O.BOX 1727
JACKSON MS 39215-1727

OR

HCTC
P.O. BOX 51
RAYMOND MS 39154