



**LICENSE APPLICATION
CAR WASH**

APPLICANT

NAME: _____

ADDRESS: _____
(mailing address)

PHONE: _____ EMAIL: _____

BUSINESS

NAME: _____

ADDRESS: _____
(business address)

PHONE: _____ TAX ID #: _____

Date

Signature of Applicant

License expires April 30th, following the date of issuance.

FOR OFFICE USE ONLY

Fee: \$50.00, annually