

Official Use Only  
Codes

Total Amount \$

License No.

Mail Application To:  
Town of Erwin Tax Department  
P O Box 459  
Erwin NC 28339

Phone 910-897-5547 Fax 910-897-554  
Tax Collector- PAMELA P. HODGES

# Town of Erwin Tax Department

## Application for The Town of Erwin Occupational License

Application is hereby made for an occupational license for the purpose of engaging in the business, profession, or occupation hereinafter described:

(Please Print)

Name of Business (dba) \_\_\_\_\_

Address of Business \_\_\_\_\_ Zip \_\_\_\_\_

Billing Address \_\_\_\_\_

Telephone No \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Owner's Name \_\_\_\_\_

Owner's Address \_\_\_\_\_

Corporation's Name \_\_\_\_\_

Federal Employer Identification # \_\_\_\_\_

Social Security # \_\_\_\_\_ State License \_\_\_\_\_

State character or type of business, profession, or occupation \_\_\_\_\_

**Fire Inspection** Approved Yes or No (Circle) Officers Signature \_\_\_\_\_

**Code Officers Inspection** Approved Yes or No (Circle) Officers Signature \_\_\_\_\_

**I understand that I must comply with all applicable code requirements of the Town of Erwin.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant And Title