



Town of Ocean Isle Beach
3 West Third Street
Ocean Isle Beach, NC 28469
Telephone (910) 579-2166 Fax (910) 579-8804

IMMOBILE VENDOR LICENSE APPLICATION

NEW _____ RENEWAL _____

BUSINESS INFORMATION

Name of established oceanfront business _____ Account # _____

Mailing Address _____

City, State, Zip _____

Business Phone _____ Fax Number _____

Physical Address _____ Cell Phone _____

City, State, Zip _____ Other _____

E-Mail Address _____ Website _____

APPLICANT'S INFORMATION

Name of Applicant _____ Home Phone _____

Home Address _____ Fax Number _____

City, State, Zip _____ Cell Phone _____

Local Address _____ Local Phone _____

City, State, Zip _____ Other Phone _____

Description of business, including specifications of the goods or services offered and the expected locations from which the sale will be offered.

Outline of the methods to be used for solicitation _____

Description, photo or drawing of the equipment to be used _____

Make/Model _____ License Plate # _____ State _____

Year _____ Tag Number _____

Manufacturer _____ Color _____

Professional rendering of all artwork or signs to be displayed on equipment (Attached) Yes ___ No ___
(No handmade logos or signage will be allowed.)

Social Security Number _____ Driver's License State _____ Number _____

Federal Tax ID Number _____ State Sales Tax Number _____

Proof of franchise fee payment _____

Health Code Approval Attached (Must be within 30 days of the application) _____

Proof of Comprehensive Business Liability Insurance (Attached) *(\$25,000 minimum per person)* Yes ___ No ___
(\$100,000 per incident)

Signature Title Date

If no longer in business, complete information in this box and return the application.

Date business closed _____ Closing due to Sold Business to _____

Print Name _____ Dissolved

Signature _____ Other _____

N.C.G.S. 105-366(d)

a. At least 48 hours prior to the date of the pending sale, transfer, or termination of business, give notice to the assessors and tax collectors of the taxing units in which the business is located.

b. Within 30 days of the sale, transfer, or termination of business, pay all taxes due or to become due on the transferred property on the first day of September of the current calendar year.

(OFFICE USE ONLY)

License # _____ Date _____

Amount Paid & Check # _____ Date _____

Tax Collector _____ Date _____
Wendy Barbee

Planning Director _____ Date _____
Justin Whiteside

Town Administrator _____ Date _____
Daisy Ivey

Approved

Denied