



TOWN OF PEMBROKE
PO BOX 866 / 98 UNION CHAPEL RD. PEMBROKE, NC 28372
Business Registration Application

DATE OF APPLICATION: _____ EXPECTED DATE OF OPENING: _____ LICENSE FEE: **\$25.00**
(for new businesses only)

NAME OF BUSINESS: _____

DOING BUSINESS AS (DBA): _____

TYPE OF BUSINESS OWNERSHIP: ___ CORPORATION ___ SOLE PROPRIETOR/PARTNERSHIP ___ OTHER (SPECIFY)

BUSINESS PHYSICAL ADDRESS: _____

PRIMARY OWNER'S NAME: _____ SIGNATURE: _____
(or designee)

EMAIL ADDRESS: _____ PHONE: _____

EMERGENCY CONTACT NAME: _____ PHONE: _____

IS YOUR BUSINESS PREMISE OPEN TO THE GENERAL PUBLIC: _____ YES _____ NO

IS YOUR BUSINESS A HOME OFFICE: _____ YES _____ NO

NUMBER OF FULL-TIME EMPLOYEES: _____ PART-TIME EMPLOYEES: _____

BUSINESS SQUARE FOOTAGE: _____

BUSINESS STATUS: _____ NEW _____ EXISTING _____ CLOSED

BUSINESS CATEGORY: ___ SERVICE ___ RETAIL ___ OFFICE ___ RESTAURANT ___ MANUFACTURING ___ SCHOOL
___ NON-PROFIT ___ CULTURAL ___ OTHER (PLEASE SPECIFY)

DESCRIBE YOUR BUSINESS, INCLUDING ALL ACTIVITES INVOLVED _____

**PLEASE NOTIFY US OF ANY ADDRESS OR EMERGENCY CONTACT CHANGES THROUGHOUT THE YEAR.
BUSINESS REGISTRATIONS ARE NOT TRANSFERABLE. A NEW REGISTRATION MUST BE ISSUED FOR A NEW
BUSINESS.**

(FOR OFFICE USE) COMMENTS:

DEPARTMENT APPROVAL SIGNATURE: _____ DATE: _____

REMIT TO:
TOWN OF PEMBROKE
PO BOX 866
PEMBROKE, NC 28372

PHONE: 910-521-9758
E-MAIL: joann@pembrokenc.com
PAYMENT OPTION: CHECK, CASH