

APPLICANT INSTRUCTIONS:

BUSINESS TYPE:

TYPES OF PRODUCT (S) AND OR SERVICE OFFERED:

DAYS/ HOURS OF OPERATION: _____

ESTIMATED NUMBER OF EMPLOYEES: _____

#FULL TIME EMPLOYEES _____ #PART-TIME _____

I, _____, do solemnly swear,
subject to criminal penalties, that the information in this document is true and
no false or fraudulent information is used herein.

Signature of Applicant: _____

Date: _____/_____/_____