

North Little Rock Advertising & Promotion Commission 600 Main Street Ste 100, North Little Rock AR 72114 (501) 404-0143

INTERNAL USE ONLY		
Permit Number:		
Date:	Staff:	
	Updated: 3/2020	

ADVERTISING AND PROMOTION TAX PERMIT APPLICATION

PLEASE **PRINT** ALL INFORMATION

APPLICA		BUSINESS OPENING DATE		
	Month, Date, Year		Month, Date, Year	
Business Name:				
Doing Business As:	·			
Foodservice (Check One)Caterer ONLYConcessionaire*Food Truck*Convenience StoreRestaurant		Lodging (Check One)Bed and BreakfastHotel/Motel # roomsRV Park/Campground # sitesVacation Rentals (Airbnb, VRBO, Etc.) # rooms		
*Required to list where you	will be doing business in North Little Ro	ock		
Business Physical Address (required):			Zip Code:	
Business Telephone Number:		Business FAX:		
			_Zip Code:	
Complete the follow	ving for all majority owners o	•	PLEASE PRINT NO P.O. BOX	
Name	Owner/Partner 1	Owner/Partner 2	Owner/Partner 3	
Title				
Home Address				
City				
State				
Zip				
Cell Phone				
Email				



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(continued)

	Accounting Contact (who will be handling taxes on behalf of the business?)		
Name			
Title			
Home Address			
City			
State			
Zip			
Cell Phone			
Email			
The following info	ormation will be helpful to us for promoting your business to visitors.		
	Marketing/Communications Contact (in-house, agency or corporate contact who handles your website, social media, etc.)		
Name			
Title			
Cell Phone			
Email			
Business Websit	e:		
Are you on the fo	ollowing social media sites? Check all that apply.		
	Facebook Twitter Instagram		
-	ving Operating a Business in North Little Rock and the Prepared Food Definition ordinance.		
I understand	d a valid driver's license will be required to obtain a permit.		
pplicant's Name:Title:			
Annlicant's Signa	*ilvo•		