

CITY OF NEWPORT, RHODE ISLAND

APPLICATION FOR SECOND HAND LICENSE (or Transfer)

TO THE HONORABLE COUNCIL OF THE CITY OF NEWPORT:

Application is made for a **SECOND HAND LICENSE** DATE: _____

Date of Duration: ANNUAL_ Business Phone: _____

BUSINESS NAME (ownership): _____

BUSINESS DBA: _____

BUSINESS Location: _____

OWNER'S Name: _____

OWNER'S Signature: _____

OWNER'S Home Address: _____

OWNER'S Telephone #: _____

~~~~~ FOR TRANSFERS ONLY ~~~~~

PREVIOUS BUSINESS (ownership): \_\_\_\_\_

PREVIOUS BUSINESS DBA: \_\_\_\_\_

PREVIOUS BUSINESS ADDRESS: \_\_\_\_\_

PREVIOUS OWNER'S Signature: \_\_\_\_\_

~~~~~ FOR OFFICE USE ONLY ~~~~~

Filing Fee \$15.00 Date Paid: _____ New ___ Renewal ___

License fee \$100.00 Date Paid _____

License issued by: _____ Date Issued: _____

ACTION BY COUNCIL _____ ACTION DATE _____

*Note: AS OF SEPTEMBER 26, 1990, THE SECOND HAND LICENSE FEE WAS RAISED TO \$100.00