

FOR OFFICIAL USE ONLY

Customer # _____ NAICS # _____

**CITY OF AUBURN, AL
BUSINESS REGISTRATION FORM (remote workers only)**

Instruction: Complete form and submit to Revenue Office. Fields outlined in **RED** represent required information. To avoid a delay in processing of application; all information **must** be provided.

BUSINESS INFORMATION

Business Legal Name: _____ DBA Name: _____

Type of Ownership: ☐ Corporation ☐ Partnership ☐ Individual or Sole Proprietorship ☐ Limited Liability Partnership (LLP)
☐ Limited Liability Company (LLC) (Single Member) ☐ Limited Liability Company (LLC) (Multi-Member)

Federal Employer Identification # _____

First Day of Payroll in Auburn _____ (Month) _____ (Day) _____ (Year)

ADDRESS/MAILING INFORMATION

Business Location: _____, _____ (City) _____ (State) _____ (Zip)

Mailing Address: _____, _____ (City) _____ (State) _____ (Zip)

Business Phone: _____

TAX/LICENSING INFORMATION (All W-2 employees are subject to the occupational license fee.)**Required Tax Types :** ☐ Occupational **Required Filing Frequency:** ☐ Quarterly

OWNER/PARTNER/OFFICER INFORMATION

Name: _____ Title: _____

Home Address: _____ (City), _____ (State), _____ (Zip)

Business Phone : (_____) _____ Email address: _____

CONTACT INFORMATION (Person(s) who can answer tax/licensing questions about the business) (Attach additional sheets if necessary)

Name: _____ Title: _____

Business Phone # _____ Alternative Phone # _____ Email _____

BUSINESS LICENSING/TAX INFORMATION

- Companies are required to annually renew business licenses in the amount of \$105.00 for the period of time an employee remotely works in Auburn.
- Each employer of one or more persons is required by City Ordinance No. 416, as amended by Ordinance No. 1096, to withhold the Occupation License Fee of one-percent (1%) from gross earnings paid to employees for services rendered within the City of Auburn, and to pay these fees to the City each quarter.

PAYMENT INFORMATION: Cash, check, money order or credit card

- Payments can be made via www.selfservice.auburnalabama.org or via mail to 144 Tichenor Ave Ste 6, Auburn, AL 36830

STATEMENT OF DECLARATION

Under penalties of perjury, I declare that I have examined this form and to the best of my knowledge and belief, it is true, correct, and complete. My signature indicates that I am legally responsible for the business and assume all tax/licensing liabilities of this business that might occur.

Signature of the Person Legally Responsible for the Business_____
Print name of the Person Legally Responsible for Business_____
Date

Submit Completed Form to: City of Auburn-Revenue Office at 144 Tichenor Avenue · Suite 6 · Auburn, AL 36830
Office: (334) 501-7239 · Email: revenue@auburnalabama.org · Website: www.auburnalabama.org