DEPARTMENT OF TAX ADMINISTRATION
COLLECTION DEPT
234 NW CORRIDOR BLVD
JACKSONVILLE NC 28540
910-989-2202

LICENSE APPLICATION
DATE: _____

PRINT

ACCOUNT NUMBER:

OWNER'S NAME:

BUSINESS NAME:

MAILING ADDRESS:

CITY & ZIP CODE:

BUSINESS ADDRESS:

TELEPHONE NUMBER:

COUNTY PRIVILEGE LICENSES **N.C. GENERAL STATUTES NUMBER 105-37.1 - 105-113.78**

CODE	NCGS #	AMOUNT		STATUTORY CATEGORIES	STATE PERMIT NUMBER
1101	105-113.78	5.00	[ ]	BEER OFF PREMISES LICENSE >>>>>>>>>>>>	
11	105-113.78	25.00	[ ]	BEER ON/OFF PREMISES LICENSE >>>>>>>>>	
12	105-113.78	25.00	[ ]	WINE PREMISES LICENSE >>>>>>>>>>>>>	

PREVIOUS OWNER:

PREVIOUS OWNERS BUSINESS NAME:

SIGNATURE:

PLEASE SIGN AND RETURN APPLICATION WITH YOUR REMITTANCE OR PICK UP YOUR LICENSE AT THE ONSLOW COUNTY TAX OFFICE.