



PO Box 589
Midland, NC 28107
Phone (704) 888-2232

BUSINESS REGISTRATION

Business registration applications must meet zoning compliance before issuance.

PLEASE PRINT CLEARLY

Annual Business Registration - EXEMPT BUSINESS (FY July 1, 2023 to June 30, 2024)

Business Name *(to be listed on registration certificate)* _____

Physical Business Location _____
(Street) (City, State, Zip)

Mailing Address _____
(Street or PO Box) (City, State, Zip)

Owner's Name _____ Phone Number _____

SSN/FID _____ Contractor's Local ID _____ State ID _____

Type of Business: _____

Number of Employees _____

Home Occupation? Yes _____ No _____

The undersigned certifies that the information is accurate and true to the best of his/her knowledge and belief, and is in compliance with **ALL** Town ordinances and zoning requirements. Notify the Town of any changes in the registered business name, address, ownership or closure prior to action. **Certifying signature must be by Owner/Officer/Registered Agent or legal representative of the business.**

By _____ Date _____

Town Use Only

ZONING COMPLIANCE CERTIFICATION

The above business complies with all ordinances and zoning requirements of the Town of Midland.

Planning Department Approval by _____ Date _____