APPLICATION FOR BUSINESS LICENSES

WEBSITE: www.idabel-ok.gov PHONE: 580-286-7608

__**Business $100** __ **Peddler $500** __ **Sign Permit $35**

Name of Business _____ Owner _____

Location of Business _____

Address _____

City _____ State ____ Zip Code _____

Phone _____ Cell _____ Fax _____

Sales Tax# _____ FEIN _____

Location of job site (if applicable): _____

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Worker's Compensation Information

Insurer Name _____

Address _____ State ____ Zip Code _____

Phone _____ Fax _____

Policy# _____ Amt of Coverage _____

Effective Date _____ Expiration Date _____

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General Liability Information

Insurer Name _____

Address _____ State ____ Zip Code _____

Phone _____ Fax _____

Policy# _____ Amt of Coverage _____

Effective Date _____ Expiration Date _____

Applicant Signature _____ **Date** _____

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Sign Permit Only

Business _____ Location _____

Property Owner Signature _____