



Business License Application

Business Name: _____

Business Type: _____

Business Address: _____

New: _____ Renewal: _____

Mailing Address: _____

Phone Number: _____

Fax Number: _____

Contact Person: _____

Permission to Release Contact Information
(for Community Service Directory and Village of Boyle Website): YES NO

Signature: _____

Date: _____

Please return to Village Office when completed. Thank you.