Town of Ellendale



**2025 BUSINESS LICENSE APPLICATION**

Please choose one of the following options:

0 NEW Business License

0 RENEWAL Business License Number: -------

**BUSINESS LICENSE FEE $125.00** *(Checks must be made payable to Town of Ellendale)*

Business Name:

\_\_

{Name of Business as advertised and operated)

MAILING ADDRESS: PHYSICAL ADDRESS:

**OWNERSHIP TYPE:**

* **Sole Proprietor**
* **Partnership**
* **Corporation**
* LLC
* **Other**

Name(s) of Owner{s) or Entity Name:

Email address: Phone Number:

Please enclose a copy of your:

* Current State of Delaware Business License o Certificate of Insurance

# BY SIGNING THIS APPLICATION, I DECLARE UNDER PENALTY OF PERJURY, THAT THIS APPLICATION IS TRUE AND COMPLETE.

**This application shall be submitted in conformity with Section 7.10 "Business Licenses" of the Zoning Ordinance of the Town of Ellendale. Work shall not commence within the Town until a valid Business License is issued to the applicant.**

Printed Name Title

Signature \_

P.O. Box 6

300 McCaulley Ave.

Ellendale, DE 19941

Date----------

P.: 302-422-6727

F: 302-422-0863

Email: Townclerk@ellendale.delaware.gov