

Warren County Tax Collector  
POB 351  
Vicksburg, MS 39181-0351  
601-638-6181

## PRIVILEGE LICENSE APPLICATION

**INSTRUCTIONS:** All applicants fill out sections **ONE** and **FOUR**. Section **TWO** for Stores, both Retail and Wholesale. Section **THREE** for all other Businesses (Manufacturers, Corporations, Professionals and etc.)

### SECTION ONE (1)

NAME OF BUSINESS: \_\_\_\_\_

BUSINESS LOCATION (Street Address, City, State, Zip) \_\_\_\_\_

BUSINESS MAILING ADDRESS: (Street Address, City, State, Zip) \_\_\_\_\_

OWNER/OFFICER: \_\_\_\_\_ TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

NATURE OF BUSINESS: \_\_\_\_\_

### SECTION TWO (2)

Stores (Retail or Wholesale)

Inventory True Values:

Normal Amount \$ \_\_\_\_\_

Highest Amount \$ \_\_\_\_\_

### SECTION THREE (3)

All other Businesses (Mfg., Corp., Prof., etc.)

Number of Employees (including owner)

\_\_\_\_\_

### SECTION FOUR (4)

BY (Signature) \_\_\_\_\_

WARREN COUNTY TAX COLLECTOR

BY: \_\_\_\_\_ Deputy

Sworn to and Subscribed this the \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_.