

**SEARCY ADVERTISING & TOURISM PROMOTION COMMISSION  
APPLICATION FOR A&P TAX PERMIT  
GROSS RECEIPTS TAX - 1% RESTAURANT / 3% HOTEL**

(Please type or print all information.)

**NAME OF ESTABLISHMENT** - \_\_\_\_\_ for which an A&P Tax Permit is sought (*dba - Name as known to the public*)

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**Physical Street Address of Establishment** (no P.O. Boxes):  
\_\_\_\_\_

\_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone at Establishment: \_\_\_\_\_ Fax at Establishment: \_\_\_\_\_

**Person Responsible for Payment of A&P Tax:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Person(s) Responsible for Payment Cell # :** \_\_\_\_\_ **Address C/S/Z:** \_\_\_\_\_

<p><b><u>FULL LEGAL NAME OF BUSINESS' OWNER(S)</u></b> of establishment for which an A&amp;P Tax Permit is sought</p> <hr/> <p><b>Please select business type below:</b></p> <p>_____ Sole Proprietorship</p> <p>_____ Corporation (Inc.)</p> <p>_____ Limited Liability Company (LLC)</p> <p>_____ General Partnership (G.P.)</p> <p>_____ Limited Partnership (LTD)</p> <p>_____ Limited Liability Partnership (LLP)</p> <p>_____ Other (Give nature of business below) _____</p>	<p><b><u>TYPE OF ESTABLISHMENT</u></b></p> <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;"> <p>_____ <b>Food Services</b> <i>Select all that apply</i></p> <p>_____ Restaurant/Café</p> <p>_____ Cafeteria</p> <p>_____ Delicatessen</p> <p>_____ Convenience Store</p> <p>_____ Grocery Store Rest.</p> <p>_____ Caterer</p> <p>_____ Concession Stand / Event Vendor</p> </td> <td style="width:50%; border: none;"> <p>_____ <b>Lodging Services</b> <i>Select all that apply</i></p> <p>_____ Hotel</p> <p>_____ Motel</p> <p>_____ Extended Stay</p> <p>_____ Historic Inn</p> <p>_____ Bed &amp; Breakfast</p> </td> </tr> </table> <p><b>Seating capacity:</b> _____ <b>Number of Guest Rooms available to the Public:</b> _____</p>	<p>_____ <b>Food Services</b> <i>Select all that apply</i></p> <p>_____ Restaurant/Café</p> <p>_____ Cafeteria</p> <p>_____ Delicatessen</p> <p>_____ Convenience Store</p> <p>_____ Grocery Store Rest.</p> <p>_____ Caterer</p> <p>_____ Concession Stand / Event Vendor</p>	<p>_____ <b>Lodging Services</b> <i>Select all that apply</i></p> <p>_____ Hotel</p> <p>_____ Motel</p> <p>_____ Extended Stay</p> <p>_____ Historic Inn</p> <p>_____ Bed &amp; Breakfast</p>
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**Business Billing Name & Address:** \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Business Billing Contact:** \_\_\_\_\_ **Title:** \_\_\_\_\_

I declare under penalty of perjury, that this application (including any accompanying schedules) has been examined by me, and to the best of my knowledge and belief is a true, correct and complete application.

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Original Signature of Person(s) Responsible for Payment of A&P Tax \_\_\_\_\_ Printed Name of Person Responsible for Payment of A&P Tax \_\_\_\_\_ Date \_\_\_\_\_

<p><b><u>RETURN COMPLETED FORM TO:</u></b></p> <p><b>SEARCY CODE ENFORCEMENT OFFICE</b></p> <p><b>300 W ARCH</b></p> <p><b>SEARCY, AR 72143</b></p> <p><b>PHONE: 501-279-1085      FAX: 501-279-1084</b></p> <p><b>Email to: <a href="mailto:madison.lee@cityofsearcy.org">madison.lee@cityofsearcy.org</a></b></p>	<p><b><u>OFFICE USE ONLY</u></b></p> <p>Present Owners Permit # : _____</p> <p>Date Opened on System : _____</p> <p>Previous Owner's Permit # : _____</p> <p>Date Closed on System : _____</p>
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