



MOBILE COUNTY LICENSE COMMISSION

NICK MATRANGA, LICENSE COMMISSIONER

BUSINESS LICENSE COMPLAINT FORM

DATE _____

COMPLAINANT INFORMATION

NAME _____

ADDRESS _____

TELEPHONE _____

BUSINESS INFORMATION

NAME OF BUSINESS _____

OWNER(S) _____

ADDRESS _____

TELEPHONE _____

TYPE OF BUSINESS _____

BUSINESS LICENSE ON FILE? _____ (YES) _____ (NO) NUMBER _____

NOTES _____

