State of Rhode Island
Town of Warren

Renewal Application for a Business-Operating License

SECTION 1. APPLICATION INFORMATION

Applicant Name _____

Applicant Address _____

Applicant ID Number (i.e. RI Driver's License, etc.) _____

Applicant Date of Birth _____

Home Telephone Number _____

Type of Business (check one)

☐ Corporation ☐ Sole Proprietorship

☐ Partnership ☐ Limited Liability

Business Name (if corporation, limited liability co. or partnership, please complete section 4)

_____

Trade Name (d/b/a) _____

Business Location _____, Warren RI 02885

Mailing Address (if different from above)

_____

Business Telephone _____ Fax _____

Description of Business Operations:

_____

SECTION 4. COMPLETE FOR CORPORATIONS, LIMITED LIABILITY C., OR PARTNERSHIPS

(Please attach copy of organizational papers issued by the State of Rhode Island)

Names of Officers	Address
_____ President	_____
_____ Vice President	_____

_____ _____

Secretary

_____ _____

Treasurer

_____

Signature (Owner or Corporate Office)

If you have a current Drainlayer, Victualling, Liquor or Holiday License issued by the Town of Warren you do not need a Business License.

If you have questions please feel free to call 401-245-7340, 9:00 am to 4:00 pm Monday-Friday.

Please return form with $25 License Fee to:

Warren Town Clerk's Office
514 Main Street
Warren RI 02885