

## Application for Tire Business Permit

City of Memphis Permits Department  
2714 Union Avenue Ext. 2<sup>n</sup> Floor  
Memphis, TN 38112  
(901) 636-6711 (office)  
(901) 323-9913 (fax)

This form is used to apply for a City of Memphis Tire Business Permits in accordance with the City Ordinance, Chapter 15, Article III. The information requested herein is necessary for determining eligibility for permit. Only completed applications will be accepted for consideration. Any false statements or misrepresentations made in this application will result in the applicant being denied a permit. The completed application must be signed in the presence of a Notary Public.

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Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Telephone: \_\_\_\_/\_\_\_\_/\_\_\_\_ Fax Number: \_\_\_\_/\_\_\_\_/\_\_\_\_

Tax Identification Number \_\_\_\_\_ Email address: \_\_\_\_\_

The estimated number of tires that will be stored: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_  
Last First Middle

Home Address: \_\_\_\_\_

SSN: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Telephone Number: \_\_\_\_/\_\_\_\_/\_\_\_\_

Yes \_\_\_\_ No \_\_\_\_ Have you ever been charged with or convicted of any criminal offenses? If yes, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

List the name and address of three character references

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By signing this application below, I hereby certify all of the following:

1. I authorize the City, agents, and employees, to seek information and conduct an investigation into the truth of the statements set forth in this application and on all employees and managers of the business.
2. I agree to comply with all applicable state laws, including but not limited to the City's building, zoning and health regulations.
3. All of the information provide in this application is true and correct.

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Applicant Signature

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Date

Subscribed and sworn to before me this \_\_\_\_\_ of \_\_\_\_\_, 20\_\_.

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Notary Public

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Commission Expiration