

TOWN OF BERLIN 10 William Street Berlin, MD 21811

APPLICATION FOR BUSINESS LICENSE LICENSE FEE \$150

<u>IMPORTANT:</u> This form is for use by businesses with a physical location within the Town of Berlin. Outside Contractors use "CONTRACTORS APPLICATION FOR BUSINESS LICENSE" available at: https://berlinmd.gov/department/town-forms-and-permit-applications/.

| Today's Date: | | Opening Date: | |
|--|------------|---|-----------------------------|
| Business Name: | | Phone: | |
| Proprietor/Manager: | | EIN/SSN: | |
| Legal Entity Name: | | Federal ID # | |
| State ID #(for personal property) | | Email: | |
| Mailing Address: | | Physical Address:(if different than mailing) | |
| City, State, Zip: | | Town Commercial T | rash collection: Y N TBD |
| Type of Business: | | | |
| · | | to obtain any applicable sign permits, building permits, tting as required (including Historic District as applicable). Date | |
| Signature | | Position/Title | |
| Office Use Only: | | • | |
| Clerk: | From | | Period Covered: From to |
| Invoice # | Date Sent: | | |
| Departmental Review Eco. & Comm. Dev. Review: Initials/Date Planning & Zoning Review: Initials/Date | | Public Works Rev | iew: Initials/Date |

NOTE: Please complete both Berlin PD and Wor. County Forms below.



Town of Berlin 10 William Street Berlin, MD 21811 410-641-2770 410-641-2316 (Fax)



410-641-1333 Berlin Police EMERGENCY CONTACT INFORMATION FORM

| BUSINESS NAME: | DATE: |
|---|---|
| BUILDING ADDRESS: STREET NUMBER | STREET NAME |
| CITYSTATE | ZIP |
| MAIN BUSINESS PHONE NUMBER:ALTERNATE BUSINESS PHONE NUMBER: | |
| EMERGENCY CONTACTS (please list in priority | order) |
| 1. NAME:HOME ADDRESS: | POSITION: |
| HOME PHONE: | _ CELL: |
| | POSITION: |
| HOME PHONE: | CELL: |
| 3. NAME: | POSITION: |
| HOME PHONE: | CELL: |
| IS BUILDING ALARMED? FIRE: | BURGULAR: PANIC: |
| ALARM COMPANY ID (not your password): | |
| IS THERE A SAFE ON PREMISES? YES NO | IS MONEY KEPT ON THE PREMISES? YES NO |
| ARE WEAPONS KEPT ON THE PREMISES? YES | |
| | SITE OR OTHER HAZARDS THAT POLICE, FIRE, RESCUE, BE AWARE OF: |
| | |





Worcester County Department of Emergency Services 1 West Market Street, Room 1002 Snow Hill, MD 21863 410-632-1311 410-632-2141 fax

EMERGENCY CONTACT INFORMATION FORM

| BUSINESS NAME: | | | | |
|---|------------------------|--|--|--|
| BUILDING ADDRESS: Street Number | | Unit Number (if applicable) | | |
| Street Name: | | City: | | |
| MAIN BUSINESS PHONEN | IUMBER <u>:</u> | | | |
| ALTERNATE BUSINESS PHO | NE NUMBERS: _ | | | |
| EMERGENCY CONTACTS (p | lease list in priority | order) | | |
| 1. NAME: | | POSITION: | | |
| HOME ADDRESS: | | | | |
| HOME PHONE: | CELL: | PAGER: | | |
| 2. NAME: | | POSITION: | | |
| HOME ADDRESS: | | | | |
| HOME PHONE: | CELL: | PAGER: | | |
| 3. NAME: | | POSITION: | | |
| HOME ADDRESS: | | | | |
| HOME PHONE: | CELL: | PAGER: | | |
| IS BUILDING ALARMEDFIRE: BURGLAR: PANIC: PANIC: | | | | |
| ALARM COMPANYNAME | : | | | |
| ALARM COMPANY ID: (if ap | oplicablenot your j | passcode): | | |
| IS BUILDINGEQUIPPED W | ITH KNOXBOX(ke | ey lock box): YES NO | | |
| LOCATION OF BOX: | | | | |
| | EMERGENCY MEI | ON SITE OR OTHER HAZARDS THAT DICAL SERVICES NEED TO BE AWARE | | |

All information is kept confidential and used only for public safety purposes only. Please keep your information with us updated. If you can provide any floor plans or additional important information about your business, please include it with the return of this form to the above address, fax or e-mail to: dispatch@co.worcester.md.us.Contact us with any questions you may have concerning this form or any other emergency preparedness concerns. Thank you for your cooperation to allow us to provide the best and most accurate information available to the emergency responders to your business. Keylock boxes are available from your local firecompany to allow immediate emergency access and reduce property damage to gain entry in an emergency situation entry in an emergency situation.