



## **OCCUPATIONAL LICENSE PACKET**

### **Occupational License Checklist Application for Occupational License for no fixed place of business/food trucks Information Sheet**

#### **Occupational License Checklist**

- Verify location (see Code Enforcement Office)  
(one-half mile from a fixed place of business selling similar items)
- Letter from owner of property allowing mobile unit to be parked (attach copy)  
(if applicable)
- Completed application
- Check for all applicable Business Authorization/ID Numbers  
(Items A, B, C will be required for licenses)
- Health Permit (attach copy)
- Liability Insurance--\$250,000 minimum (attach copy)

**Small Business Administration offers a wealth of knowledge and information on starting and continuing a business. Check out their website for further information. <https://www.sba.gov/>**

**Or a local Small Business Development Center: <https://www.nsula.edu/sbdc/>**

**Comments:**



**APPLICATION FOR OCCUPATIONAL LICENSE  
NO FIXED PLACE OF BUSINESS/FOOD TRUCKS**

Date of Application: \_\_\_\_\_

Date Opened: \_\_\_\_\_

**Application is required for: (check all that apply)**

New Business       Purchase of Existing Business       Chain Store      Number of stores \_\_\_\_\_

Name of New Business: \_\_\_\_\_

Name of Prior Business (if applicable): \_\_\_\_\_

Nature of Business – Description of Sale or Activities: \_\_\_\_\_

Location Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Point of Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Business Owner’s Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Business Owner’s Address: \_\_\_\_\_

**Type of Ownership: (check one)**

Sole Proprietorship       Partnership       LLC – Limited Liability Corporation       Corporation

Non-Profit       Other: \_\_\_\_\_

**Business Authorizations/ I.D. Numbers:**

- A. Local Sales & Use Tax Number: \_\_\_\_\_
- B. Louisiana State I.D. Number: \_\_\_\_\_
- C. Federal Employer I.D. or Owner’s SSN: \_\_\_\_\_
- D. Health Permit (attach copy): \_\_\_\_\_
- E. Liability Insurance (\$250,000) (attach copy): \_\_\_\_\_

**Property Owner’s Contact Information (if applicable):**

Property Owner’s Name: \_\_\_\_\_

Property Address: \_\_\_\_\_ Owner’s Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Authorization:**

I affirm that the information given on this application is true and correct. I will report any change in business ownership, operation, and/or address immediately.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Preparer**

\_\_\_\_\_  
**Date**

Retailers with no fixed place of business: Initial fee is \$150; renewals are based upon gross income or \$150, whichever is greater.

## Occupational License Information Sheet

In order to obtain a new Occupational License for the City of Leesville, the following steps must be taken, if applicable, before submitting the application:

\_\_\_ Obtain Occupational License packet:

City of Leesville, Finance Department  
401 Nolan Trace  
337-404-4098/4099

\_\_\_ Verify location:

City of Leesville-Code Enforcement Office (Kimberly Beery)  
401 Nolan Trace  
337-404-4103

\_\_\_ Obtain a local Sales & Use Tax number:

Vernon Parish Sales Tax Department  
117 Belview Rd  
337-239-1631

\_\_\_ Obtain a state sales tax number:

<http://revenue.louisiana.gov/>  
Click on LaTAP link

\_\_\_ Obtain a Federal Tax I.D. number (if not using Social Security number):

<https://www.irs.gov/businesses>

\_\_\_ Obtain a Board of Health Permit:

Vernon Parish Health Unit, Office of Public Health  
406 W. Fertitta Blvd.  
337-238-6410