



## APPLICATION FOR PRIVILEGE LICENSE

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

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

Mailing Address/City/Zip: \_\_\_\_\_

Physical Address/City/Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

Corp/LLC Name (if applicable): \_\_\_\_\_

Owner Name: \_\_\_\_\_

Owner Address/City/Zip: \_\_\_\_\_

Owner Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Best Local Contact Name/Info \_\_\_\_\_

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

License Mailed or Picked Up – *Circle One*

RETURN TO CITY CLERK'S OFFICE P.O. BOX 607 BENTON, AR 72018; OR UPLOAD FORM AND PAY  
ONLINE AT <https://citypay.ark.org/service/Benton>

QUESTIONS? PLEASE CALL 501-776-5908. Cost of License is \$50 plus \$1 per employee working over 20  
hours per week.

### **OFFICE USE ONLY**

C.S. SERVICE OUTSIDE ELECTRICAL INSPECTION: \_\_\_\_\_ State Remodel

Contractor

ANIMAL CONTROL: \_\_\_\_\_ License \_\_\_\_\_

FIRE MARSHALL: \_\_\_\_\_

WATER DEPARTMENT: \_\_\_\_\_

SEWER DEPARTMENT: \_\_\_\_\_

HEALTH/DHS DEPARTMENT: \_\_\_\_\_

BUILDING INSPECTOR: \_\_\_\_\_

A&P \_\_\_\_\_