



City of Johns Creek
 Revenue
 12000 Findley Road, Suite 400
 Johns Creek, Georgia 30097
 (678) 512-3200
 www.johnscreekga.gov

Non-Profit Business Registration Application

Business or Organization Name & Contact Information:				Control Number: <small>(Assigned by the City)</small>				
Business or Organization Name/DBA								
Physical Location Address			Suite/Unit	City		State	Zip	
Office Telephone		Email			Fax			
Mailing Address			Suite/Unit	City		State	Zip	
Corporate Information								
Corporate Name								
Corporate Address				Suite/Unit	City		State	Zip Code
Contact Name				Phone Number				
Additional Requested Information								
Federal ID (FEIN)				Date Organization Commenced Operations				
Give a description of the primary activity				Is this business required by the State of Georgia to have a state license? <input type="checkbox"/> Yes or <input type="checkbox"/> No <i>If yes, please submit a copy of your state license.</i>				

APPLICANT CHECK LIST: *(For Applicant to Check as Each Item is Completed and Attached to Application)*

- Completed application with all business, contact and additional requested information.
- Copy of 501c letter from the IRS.
- "Lawful Presence" Affidavit signed, notarized with copy of driver's license.
- Private Employer Affidavit signed and notarized.

 Printed Name of Applicant

 Title

 Signature of Applicant

 Date

STAFF USE: REVENUE: Initials: _____ Date Entered in Database: _____

ZONING: Property Zoned: _____ Use allowed? Y/ N _____ Reviewed by: _____

FIRE: Existing Building Y/N _____ Pass/Fail: _____ Initials: _____

Building: Approved Y/N: _____ Initials: _____

