



LICENSE REQUIREMENTS VERIFICATION

- Name Change
Change of Ownership
New Building/Addition
Existing Building

Business License No.: _____ Use of Land Building: _____

Business Name: _____ Former Name: _____

Business Owner's Name: _____ Phone: _____

Address of License: _____

1. Zoning Classification: _____

Zone for Property

Type of Land Use

- Proper Classification: Yes No
Home Occupation: Yes No
Landscaping Requirements: Yes No N/A

Planning Department: _____ Date: _____

(334) 705-5156

2. Inspected for Building Code Compliance: Yes No N/A

Building Inspector: _____ Date: _____

(334) 705-5420

3. Inspected for Fire Code Compliance: Yes No N/A

Fire Inspector: _____ Date: _____

(334) 705-5300

4. Meets all Sewer Assessment Requirements: Yes No N/A Fees Paid _____

Public Works Director: _____ Date: _____

(334) 705-5413

5. Meets all Public Works Manual Requirements: Yes No N/A

City Engineer: _____ Date: _____

(334) 705-5450

6. Meets all County Health Requirements: Yes No N/A Permit No. _____

(Food Only)

County Health Official: _____ Date: _____

Lee County Health Department, (334) 745-5765

7. Alcohol Beverage License Review: Yes No N/A

(Alcohol Beverage License Only)

Opelika Police Dept: _____ Date: _____

(334) 705-5200

NOTE: Verification Forms is based on Code of Ordinances, City of Opelika, Section 14-4. Applicant must receive signed approval from each City official before a license may be issued. (In some cases, the signature of the County Health Official and/or Opelika Police Dept. are not required.) If you have any questions, please contact:

City of Opelika Business License Department- (334) 705-5160
P. O. Box 390, 204 South 7th Street, Opelika, AL 36301-0390