

TOWN OF SULLIVAN'S ISLAND BUSINESS LICENSE ACCOUNT MODIFICATIONS

l,	, with		
(Print first and	last name)	(Business Nam	e)
request that the Town of S	fullivan's Island process the fol	lowing to our busines	s license account:
	It the same (Receive the ir h year, then do a license u		
Change our acco	unt so that we renew our	license annually.	
I understand that this deci future.	sion can only be made one tim	e and it cannot be cha	anged in the
(Business Name)		(Phone number)	
(Street Address)	(City)	(State)	(Zip code)
(Signature)			(Date)