



City of Foley, AL

407 E. Laurel Avenue
Foley, AL 36535

Signature Copy

Resolution: 16-1342-RES

File Number: 16-0750

Enactment Number: 16-1342-RES

A resolution to approve or deny business license application

WHEREAS, during the regular scheduled Council meeting of December 5, 2016, Council adopted Resolution 16-1330 A Resolution to approve the revocation of a business license under Adam Bond for B&R Tires Automotive, and

WHEREAS, the revocation of the business license was the result of Adam Bond, Amanda Bond and other employees being arrested for drug trafficking out of the business, and

WHEREAS, on December 8, 2016, the City of Foley received a Business License Application for B&R Tires Automotive from Amanda Bond, who was also arrested for drug trafficking out of the business.

NOW THEREFORE BE IT RESOLVED that the City Council of the City of Foley, Alabama, as follows:

SECTION 1: Denies the Business License Application filed by Amanda Bond for B&R Tires Automotive.

SECTION 2: This Resolution shall become effective immediately upon its adoption as required by law.

PASSED, APPROVED AND ADOPTED this 19th day of December, 2016.



President's Signature

Date

12-21-2016

Attest by City Clerk

Date

12-21-2016

Mayor's Signature

Date

12/22/16



CITY OF FOLEY, ALABAMA BUSINESS APPLICATION (CONFIDENTIAL)

The City Does Impose the Business License Tax In its Police Jurisdiction

Complete and Mail or Fax To:

CITY OF FOLEY

PO BOX 1750

FOLEY, AL 36536

(251) 943-1545 Fax (251) 952-4014

Applicant Complete This Box

FED ID # _____

ST of ALA TAX # _____

FORM OF OWNERSHIP (Check One)

Sole Prop. ☒

Partnership _____

Corp. _____

Prof Assoc _____

LLC _____

Other _____

Please Print or Type

SEE REVERSE SIDE FOR INSTRUCTIONS AND FURTHER INFORMATION

Application Type: New _____ Owner Change ☒ Name Change _____ Location Change _____

Legal Business Name: Bond R Tires Automotive

Trade Name: (If different from above) _____

Business Activities: (Brief description - Retail clothing sales, wholesale food sales, rental of industrial equip., computer consulting, etc.)

New Tires used tires sales Automotive service repair

Physical Address: 1021 N. Hickory St Foley AL 36535
(STREET) (CITY) (STATE) (ZIP CODE)

Mailing Address: _____
(STREET) (CITY) (STATE) (ZIP CODE)

Telephone: (Business) _____ (Fax) _____ (Home Phone) _____

Name & Phone # for Contact Person: Amanda L. Rawson Bond

Email Address for Contact: _____

List Following for Owner(s), Partners, or Officers (Attach separate sheet if necessary)

Name	Residence Address	SSN (if not publicly traded co.)	Title
<u>Amanda Rawson Bond</u>			<u>owner</u>

Date Business Activity Initiated or Proposed in Foley: 12-8-16 # of Employees 2

Anticipated Gross Revenue in Foley through December 31: \$ 2000 to 7,000

This application has been examined by me and is, to the best of my knowledge, a true and complete representation of the above named entity, and person(s) listed. I understand that my license may be revoked for any false statements made herein.

Date 12-8-16 Signature Amanda Rawson Bond Title owner

THIS AREA FOR MUNICIPAL USE ONLY

Account ID # _____ Amount Paid \$ _____ Received By _____ Date _____

PHYSICAL LOCATION: ☐ CITY ☐ POLICE JURISDICTION ☐ OUTSIDE CORP LIMITS & PJ

Pre-approval Form Complete: ☐ YES ☐ NO NAICS Code(s) _____

Tax Types: _____ Remit To: _____

Business Type: ☐ Retail ☐ Wholesale ☐ Building Contractor ☐ Service ☐ Professional ☐ Manufacturer ☐ Rental
☐ Other _____