



# CITY OF BUFFALO - BUSINESS LICENSE APPLICATION

65 Niagara Sq. City Hall Room 301 Buffalo, NY 14202  
Phone (715) 851-4078 Fax (716) 851/4952

## REQUIRED COPIES of DOCUMENTATION with BUSINESS LICENSE APPLICATION

- Copy of current Government Issued Photo Identification**  
(i.e. Driver's License or Green Card)
- Copy of current Utility Bill listing applicant's home address**  
(not required for personal license, i.e., taxi driver, peddler, etc.)
- Copy of New York State Tax ID Certificate or Social Security Number**  
(not required for personal license, i.e., taxi driver, peddler, etc.)
- Copy of DBA (Business Certificate) or Corporate Filing Receipt**  
(not required for personal license, i.e., taxi driver, peddler, etc.)
- Copy of Proof of Ownership of Property (Deed) for Business location  
or a Commercial Lease Agreement**  
(not required for personal license, i.e., taxi driver, peddler, etc.)
- Submit a Police Record Check for**
  - Collection Agency
  - Lodging House
  - Lodging House Agent
  - Arcade
  - Restaurant Dance
  - Public Dance Hall
  - Auctioneer
  - Second Hand Dealer
  - Scrap Processor
  - Used Car Dealer
  - Tire Handler
  - Pawn Broker
  - Taxi Cab Driver
  - Ambulance Driver
- Complete Application Form and License Fee**
- Complete New License Application Fee**



BYRON W. BROWN  
Mayor

CITY OF BUFFALO  
PERMIT & INSPECTION SERVICES  
OFFICE OF LICENSES



JAMES COMERFORD, Jr.  
Commissioner

**APPLICATION FOR A PET SHOP LICENSE**

Complete this Application for a Pet Shop License

Submit the one-year license fee of \$36.75.

A Pet Shop License expires October 1<sup>st</sup>.

Date \_\_\_\_\_

**Applicant Name** \_\_\_\_\_

Phone \_\_\_\_\_

**Applicant Address** \_\_\_\_\_  
street city state zip

**Owner of Business** (if other than applicant) \_\_\_\_\_

**Business Name** \_\_\_\_\_ Phone \_\_\_\_\_

**Business Address** \_\_\_\_\_  
street city state zip

**Tax ID #** \_\_\_\_\_ *or* **Social Security #** \_\_\_\_\_ **Number of Employees** \_\_\_\_\_

Types of Animals on the Premise	Amount

Subscribed and sworn before me this  
\_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
Commissioner of Deeds in and for the City of Buffalo

Date \_\_\_\_\_

Office of Licenses  
65 NIAGARA SQUARE / 301 CITY HALL  
BUFFALO, NY 14202-3303  
(716) 851-4078 / FAX: (716) 851-4952