



The Town of Fenwick Island

800 Coastal Highway, Fenwick Island, DE 19944-4409

302-539-3011 ~ 302-539-1305 fax

www.fenwickisland.delaware.gov

Mercantile License Application MERCHANT LICENSE

Applicant Name: _____

Home Address: _____

Home Telephone: _____

Email Address: _____

Name of Business: _____

Business Address: _____

Business Telephone: _____ Fax # _____

Names & Addresses of Principal Corporation Officers:

Full Description of Business:

I hereby acknowledge that in order to maintain my license privilege, I must comply with all Regulations and Ordinances of The Town of Fenwick Island and that all taxes and assessments due The Town of Fenwick Island upon the property which I own will be paid.

Signature

Make check payable to: Town of Fenwick Island

Merchant License: \$185.00 (calendar year) + .10 per square foot + \$53.00 (ambulance fee)

Late Fee: \$100.00

REVISED 04/2019



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Merchant License Application

PLOT PLAN OF BUSINESS

Business

Name: _____

Location: _____

Drawing of Location Floor Plan (include dimensions)

(For Office Use Only)

Square Footage: _____ Rate: _____ Total Square Footage: _____

License Fee: _____ Approved by: _____ Date: _____

Revision: 4/2019



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