





CITY OF DALLAS CONVENIENCE STORE REGISTRATION

New Application
Updated Application

Store Name:
Updated Application

Store ID Number:
Store Address:

Store Address:
Store Phone:

Store Fax:
Store Fax:

City:
Store Complexies

Zip Code:
Store Email:

APPLICANT (STORE OWNER)

First Name:	Last Name:	
Corporation Name:	Percentage of Ownership:	
Mailing Address:	City:	
State:	Zip Code:	
Phone:	Fax:	
Email:		

* If more than one owner, provide contact information for additional owners on an addendum attached to this application.

STORE MANAGER OR OPERATOR

First Name:	Last Name:	
Corporation Name:	Percentage of Ownership:	
Mailing Address:	City:	
State:	Zip Code:	
Phone:	Fax:	
Email:		

Page 1 of 3

EMERGENCY CONTACT PERSON (MUST BE AVAILABLE IN CASE OF EMERGENCY)

First Name:		Last Name:	
Mailing Address:		City:	
State:		Zip Code:	
24 HR. Phone Number:		Email:	

REGISTERED AGENT

First Name:	Last Name:	
Mailing Address:	City:	
State:	Zip Code:	
Phone Number:	Email:	

LIEN HOLDER**

(OR OTHER PERSON WITH A FINANCIAL INTEREST IN THE CONVENIENCE STORE)

First Name:	Last Name:	
Mailing Address:	City:	
State:	Zip Code:	
Phone Number:	Email:	

* If more than one lien holder, provide contact information for additional lien holders on an addendum attached to this application.

TYPE OF BUSINESS:	
Square Footage of Store:	
	Does the store sell paraphernalia? 🗌 Yes 🔲 No
Name of Applicant:	
Signature of Applicant:	

Page 2 of 3

COUNTY OF DALLAS

On_____, 20____, _____personally appeared before

me, whose identity I proved on the basis of ______to be the signer of the above document, and he/she

acknowledged that he/she signed it.

Notary Public _____

Return Form to:

Department of Code Compliance

Attn: C-Store Registration

320 E. Jefferson Blvd. Rm. 208

Dallas, TX 75203

If you have any questions, please call (214) 948-5353.

Business Use Only:			
RA:	Beat:	Council District:	Code District:

Page 3 of 3