

CITY OF MENTOR-ON-THE-LAKE  
5860 ANDREWS ROAD  
MENTOR-ON-THE-LAKE OH 44060  
(440) 257-7216 FAX (440) 257-2766

**BUSINESS LICENSE RENEWAL  
SHORT FORM**

**NAME OF BUSINESS:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**WEBSITE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**I hereby attest that the information listed on the last Business License Application that was submitted to the City of Mentor-on-the-Lake, remains the same and therefore it is not necessary to submit the long form of the license renewal.**

\_\_\_\_\_  
PRINTED NAME OF APPLICANT

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

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