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PHONE: 801-785-6057

[www.pgcity.org / mcook@pgcity.org]

♦ BUSINESS LICENSE APPLICATION ◆

NOTICE: Please complete each statement below. Incomplete applications will not be accepted. **Applications must be completed within thirty (30) days**. Any application not completed within this time frame, will require repayment of fees and re-application of license

SECTION A — BUSINESS INFORMATION

| Name of Business: | | | | Busines | ss Phon | ne: | | | |
|---|-------------------------------|------------------------------|--------------------|----------------|------------|-----------|-------------|-----------|--|
| | | | | FAX N | umber: | | | | |
| Business Address: | (Street Number) | (Suite/Unit) | (City) | | | (State) | | (Zip) | |
| Business Mailing Addres | | (Suite/Onit) | (City) | | | (State) | | (Zip) | |
| | (Street Number) | (Suite/Unit) | (City) | | | (State) | | (Zip) | |
| State Sales Tax Number (i | if applicable): | | | Propo | sed Sta | rt Date: | | | |
| | | | | | | | | | |
| State Registration Number / DBA / FEIN (if applicable): | | | | | | | | | |
| [YesNo May we share | | | | | | | | | |
| your business to develop an | | | | <i>y</i> = = | | , | -J | | |
| Nature of Business: | | | | | | | | | |
| Detailed Description of C | | | | | | | | | |
| Will there be any buildin | | | | | Area in | Sq. Ft.): | | | |
| Commercial License - Pr | - | | | | | 1 | | | |
| Non-Homebased Busines | | | | | | | | | |
| Does Your Business Hav | - | • | ount ivunioei | | | | | s: Yes No | |
| Does four business hav | e a Security Afarm S | system: res no | | Are you a | Sexua | ny Orient | eu Dusiness | s: res no | |
| Will any of the follow | wing be a part of | the business: | | | | | | | |
| · Fireworks Sales | | ····· | | | Yes | No | N/A | | |
| · Beer/Liquor Sales | | | | | Yes | No | N/A | | |
| · Amusement Devices | | | | | Yes | No | N/A | | |
| · Door-to-Door Sales | | | | | Yes | No | N/A | | |
| · Motorized Vehicle | | | | | Yes | No | N/A | | |
| · Bill Posting/Handbills | | | | | Yes | No | N/A | | |
| | PART B — HO | ME OCCUPATIO | N INFORM | IATION | ONLY | Y | | | |
| · Will customers visit the | • | | | | Yes | No | | | |
| · Will display or stock of | f merchandise be at h | ome | | | Yes | No | | | |
| · Will employees be at the | | | | | Yes | No | | | |
| · Any unusual traffic be | created in neighborho | ood | | | Yes | No | | | |
| · Will parking on roadsic | | | | | Yes | No | | | |
| · Will flammable, toxic of | | | | | Yes | No | | | |
| · What portion of home i | s to be used for busin | ness (25% total struct | ure area) | | | | | | |
| | PART C — | BUSINESS OW | NER INFO | RMATI | <u>ION</u> | | | | |
| O 1 M | | | | | | | | | |
| Owner's Name: (If | other than sole proprietor, g | ive names of partners or cor | porate president a | and secretary) | 1 | | | | |
| Home Address: | | | | | | | | | |
| | (Street Number) | | (City) | | | (State) | | (Zip) | |
| Home Phone: | | Drivers Li | cense Numb | er: | | | | 76 | |
| Social Security Number | î : | Da | te of Birth: | | | | | (State) | |

This form is an application for a business license. The receipt for payment of license fees thereof does not constitute being approved to operate a business. The actual license will be issued only when all inspections are completed and signed off by the various City departments and approval is given by the Business License Office. To open and/or operate a business without final approval is a Class B Misdemeanor and punishable by law.

LIST TWO RESPONSIBLE / AVAILABLE EMERGENCY CONTACTS:

| Name: N | lame: | | | | |
|--|---|--|--|--|--|
| Address: A | Address: | | | | |
| Phone: Pl | Phone: | | | | |
| I UNDERSTAND AND AGREE to comply with all regulations of business shall not commence at this location without first obtain Zoning, Fire Officials, and the County Health Officials must first be cactivities. | ing a business license, and that inspections of the City Building, | | | | |
| Business Owner's Signature | Date | | | | |
| BELOW THIS LINE FOR OFF | FICE USE ONLY | | | | |
| NOTE: INITIAL BUSINESS LICENSE FEE MUST BE PAID WIT. THER CERTIFIED FUNDS. BUSINESS LICENSE RENEWALS SI ESPONSIBILITY OF RENEWAL IS THAT OF THE LICENSEE. KCUSE THIS RESPONSIBILITY. [Title 3, 3-1-6, Pleasant Grove Municip | HALL <mark>BE DUE ANNUALLY ON OR BEFORE <u>DECEMBER 31.</u> FAILURE TO RECEIVE RENEWAL NOTICE DOES NOT</mark> | | | | |
| Home Occupation | 50.00 \$ | | | | |
| Home Occupation No Offsite Impact | 0.00 \$ | | | | |
| Commercial/Industrial/Manufacturing | 75.00 \$ | | | | |
| Residential Solicitation (per individual) | 25.00 \$ | | | | |
| Transient, Itinerant Merchants, Itinerant Vendors (annual) | 100.00 \$ | | | | |
| Temporary Street Vendor (one to seven days) | 15.00 \$ | | | | |
| Auctions Seasonal Business Licenses: | 100.00 \$ | | | | |
| Firework Sales (Per Location) | 300.00 \$ | | | | |
| Motorized vehicle retail sales (ice cream vendors, etc., 120 days (\$150 for first six (6) vendors; \$25 for each additional vendor) Christmas Tree Lots (permit fee), Farmers Markets, Booths, Star | maximum) 150.00 \$ | | | | |
| (Per Location) | 100.00 \$ | | | | |
| Alcoholic Beverage License Fees: | | | | | |
| Beer License: Insurance Bond Council Appro *Retail Fee: Class A or B: \$200.00 Class C: \$300 | | | | | |
| *Retail Fee: Seasonal & Club License: | 300.00 \$ | | | | |
| *Application fee (Non-refundable): | 100.00 \$ | | | | |
| Bill Posting and Handbills Amusement Devices: | 25.00 \$ | | | | |
| Yearly fee for any number or combination of pool/tables, pinball electronic games, juke boxes, as well as any other amusement de | | | | | |
| Change of location/transfer fee: | 25.00 \$ | | | | |
| | TOTAL FEE \$ | | | | |
| | ire Dept. Approval | | | | |
| Zoning Dept. Approval Bublic Safety Motorized Vehicle Inspection | Public Safety Approval | | | | |
| | | | | | |