PARK CITY MUNICIPAL CORPORATION

445 Marsac Ave. P.O. BOX 1480 PARK CITY, UT 84060 - 435-615-5221

BUSINESS LICENSE APPLICATION

	STATE SALES TAX NUMBER	STATE LICENSE NUMBER (Contractors, Realtors, LMT #, etc.)
UTAH DBA FILE NUMBER	FEDERAL I.D. NUMBER	

BUSINESS NAME & DBA Name	BUSINESS TYPE: CORPORATION _____ LIMITED LIABILITY CORP. _____ Limited liability partnership _____ Non-profit _____ PARTNERSHIP _____ SOLE PROPRIETORSHIP _____	MAILING ADDRESS:	
		TELEPHONE (BUSINESS)	NAICS CODE
WEBSITE	EMAIL ADDRESS	FAX NUMBER	HOME OCCUPATION YES NO
GENERAL DESCRIPTION OF BUSINESS ACTIVITY			

RESPONSIBLE PARTY (LOCAL)	ADDRESS (HOME)	TELEPHONE (HOME)
OWNER NAME	ADDRESS (HOME)	TELEPHONE (HOME)

I certify under penalty of perjury and license revocation that I am the authorized representative of the property owner; that I have read, know and fully understand the information and provisions of this license and the accompanying ordinance section governing business licenses; I certify that the information provided and representation made are complete and accurate to the best of my knowledge and my application is in accordance with Park City ordinances. This license shall be **VOID** if information or representations provided by licensee is incorrect or later changes and I fail to update such information within ten business days of the change of information. I acknowledge and understand the following: 1) That **THIS IS NOT A LICENSE**, but merely an application for a license to do business within Park City. 2) That if my application is approved, I shall be notified and issued a license certificate which must be displayed at my place of business at all times. 3) That all Business Licenses expire on December 31st of the year issued. 4) That the granting of this license to do business within Park City does not discharge or replace any other licensing or registration requirements I may have under City, County, State or Federal laws.

Name _____ SIGNATURE _____ DATE _____

FEES

FEE DESCRIPTION	FEE RATE	X	# OF UNITS	=	AMOUNT DUE
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____

ADMINISTRATION FEE $

TOTAL BUSINESS LICENSE FEE $

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