

Treasurer's Stamp

Business License Application

Please Col	inpiete Aii	Sections				
Date of Application	າ					
License Number		(Assigned by				
Check all that apply		, , , , , ,	•			
RENEWAL Hon	ne Busines	s License Co	mmercial B	usiness Licens	e Ter	nporary
Business Owner's Name						
Owner's Address						
Business Name						
Please Describe your Busines	ss					
Physical Address						
Mailing Address						
Phone Numbers:						
MobileT	ext? Y N	Business Phone		Other_		
Website		Emai	il			
Sales Tax I.D.		Federal Ta	ax I.D			
Are you required to have Sta	te License?	(If yes, Please Atta	nch State Li	cense)	YES	NC
Average Number of Employe	es		_ Part or F	ull Time		
Days and Hours of Operation	l					
Do you want your business a	ddress/pho	one number shared	with other	entities?	YES	NC
Business is aCorpora	ation	Sole Proprietorsh	nipI	Partnership	Limited	Liabilit
PO Box 189 45 South 100 E	ast Spring (City, UT 84662 43	5-462-2244	1 www.sprin	gcityutah.org	<u> </u>

Business License Fees		
Temporary \$10		\$
New Business Application/License Fee \$4	\$	
Business License Renewal Fee \$25.00	\$	
Number of Full-Time Employees	_@ \$5.00 each	\$
Number of Part-Time Employees	_@ \$3.00 each	\$
Approved Beer-License Fee \$37.50 Renewal Application Only: 25% Penalty if Paid after February 15th of	of the year	\$ \$
50% Penalty if Paid After March 31st of t	\$	
TOTAL FEES DUE		\$
Response Period, even if the home is businesses licenses are conditional use conducive to residential or other zor. If you have discontinued your business, pusing a signature and date. Failure to obtain a business or type of license required by this mass a \$290.00 fine. "I hereby attest that the information subthe nature of the business and the number accordance with provisions of Spring City business. I understand that this application."	use permits subject to cones not usually associate please submit to Spring City usiness license or comment nunicipality is a Class B mistomitted is a correct and true per of participants. I agree to y Ordinance, laws, and state	nditions that make them Id with businesses. If Hall a letter stating this with the ence any business activities without the Idemeanor, UAC 76-8-410 and carries The reflection of the applicant(s), and The conduct business strictly in The suites governing operation of said
Applicant Signature		
Zoning Admin Signature		
Mayor Signature(Zoning Administrator and		

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License Number_____