



7887 East 60th Avenue
 Commerce City, Colorado 80022
 Phone (303) 227-8854 / Fax (303) 289-3661
<http://www.c3gov.com/buslicense>

CITY USE ONLY	
License Number:	_____
Estimated Liability:	_____
Frequency:	_____ NAICS: _____
Zoning Classification:	_____
Expiration Date:	_____

Kennel License \$100
 Hobby Breeder License \$25

OWNERSHIP: Individual Partnership Corporation LLC LLP Non-Profit (IRS Exempt letter)

TYPE: Retail Sales Wholesale Consumer Use Home Occupation Manufacturing

TRADE NAME OF BUSINESS (d/b/a): _____

Taxpayer Name (Owner, Partnership or Corp.): _____

Physical Address of Business: _____

Mailing Address: _____

Business Phone: _____

Accounting Records Can Be Examined At: _____

Tax Contact: _____ Phone: _____ Email: _____

Federal Employer ID No.: _____ State ID No.: _____

1st Day of Business in Commerce City: _____ Industry Code NAICS: _____

Est. Taxable Sales: _____ No. of Employees: FT: PT: _____

FILING FREQUENCY: Mthly (< \$50/month) Qtrly (> \$50/month) Yrly (> \$10 a month) 1 Time Organized Event

month)

Please list all owners, partners, officers or members with 10% interest or greater in the business:

Name: _____	Title: _____
Address: _____	Phone: _____ DOB: _____
Name: _____	Title: _____
Address: _____	Phone: _____ DOB: _____

Attach additional ownership sheets if necessary

If you acquired the business in whole or in part, complete the following:

Prior Owner's Name: _____

Prior Owner's Address: _____ Date of Acquisition: _____

Purchase Price: _____ Price of Personal Property (Fixture & Equipment): _____

Person to be notified in case of emergency (in order of preference):

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Business Name: _____

Previous Business Name(s): _____

Own or Lease? _____ Freestanding or multi-tenant? _____

Building Size? _____ Lease Space Size: _____ Site Size: _____

Permanent restroom facilities on location? Yes No

City Use Only

Structure, building and premises clean? Yes: No: Remarks: _____

Shelter of sufficient size and provides shade? Yes: No: Remarks: _____

Area and Shelter where animals are to be kept are located a sufficient distance from the nearest contiguous residence?

Yes: No: Remarks: _____

Premises fenced adequately? Yes: No: Remarks: _____

I hereby certify under penalty of perjury that the statements made herein are true, correct and complete to the best of my knowledge. I hereby acknowledge and agree that if I have provided any false or misleading information, the City of Commerce City is authorized to immediately suspend or revoke any license issued pursuant to this application and issue to the licensed business a Stop Work Order. I further agree that I and the business named herein will comply with all requirements of the ordinances and regulations of the City of Commerce City.

Applicant Signature: _____ **Title:** _____ **Date:** _____