

Date Received _____
 Date Pd _____
 Amount \$ _____
 Receipt No. _____

FILLMORE CITY

75 West Center Street • Fillmore, Utah 84631-5545
 Phone (435) 743-5233 • Website: fillmoreutah.gov

Fee \$ _____
 License No. _____
 Zone _____
 CUP No. _____

BUSINESS LICENSE APPLICATION

Your business must be registered with the State of Utah before your application can be processed. Please complete all portions of this application to avoid delay in review and approval. Incomplete applications will be returned to the applicant for completion. Your cooperation and attention to the information contained in this application is appreciated. Your business is an important and welcome part of our community.

This application is for the following purpose: New Renewal Commercial Solicitor
 Home Business (Exempt) Home Business (Non-Exempt)

Nature of business: Manufacturing Wholesale Retail Services Day Care/Preschool Food
 Telecommunications Rental property Other _____

Business Name _____ Business Location _____
 Owner Name _____ Email Address _____
 Driver License No. _____ Mailing Address _____
 Home Phone _____ DOB _____
 Business Phone _____ Fed. Id. (EIN) _____
 Partner/Officer _____ Address _____
 Driver License No. _____ DOB _____

Have you ever been convicted of anything other than a traffic violation? No Yes
(If yes, please attached an explanation; falsification of information is a misdemeanor.)

Is business licensed as a: Partnership Corporation Sole Proprietorship Limited Liability

State License No. _____ (DBA's, CPA's, Attorneys, Doctors, Contractors, etc.)
(Please attach copy of state license or DBA registration number)

State Sales Tax No. _____ Detailed description of business (be specific) _____
(Please attach copy of state sales tax number)

Does your business sell products? Yes No
 (Note: If this is a food related business, you must provide a copy of the Health Inspection Certification.)

License fees are collected based on number of persons employed during the previous year, owners are included in total number of employees. New businesses may estimate number of employees. All licenses must be renewed annually by December 31st.

No. of Employees	Class	Fee
0-3	A	\$25.00
4	B	\$40.00
5-6	C	\$65.00
7-8	D	\$90.00
Over 8	E	\$125.00

Type of License	Class	Fee
Temporary (48 hr.)	F	\$45.00
Temporary (to 12 mo.)	G	\$60.00
Dance	H	\$15.00
Dance (1 yr.)	I	\$60.00
Rental	K	\$35.00
Business Registration (Home Occupation)	L	\$20.00

I, the undersigned, understand and agree to comply with all regulations of Fillmore City Ordinances, Licenses, and Business Regulations. I understand that I shall not begin nor cause to begin a business without first obtaining a business license, which may include a building inspection by the City's Building Official and/or Fire Chief.

Falsification of any information on this form is cause for revocation or denial of the application.

Date _____ Signature _____

The receipt of business license fees does not constitute approval to operate a business.

For Office Use Only

Final Approval/denial by _____

Reason denied _____

Planning Administrator Review for Conditional Use Permit & Approval: _____

Zone business to be located in: _____ Is use allowed? _____

What are parking requirements & are they met? _____

Building Safety/Fire Inspection completed on ____/____/____ by: _____
Inspector

Home Occupation Requirements

A home occupation is defined as a gainful occupation, which is conducted in a dwelling by members of the family who live in the dwelling. The home occupation must be a secondary use of the dwelling and must not change the character thereof.

Please circle the correct answers about to your home occupation.

Yes No Is your business a daycare or preschool?
If yes, how many children are there at the same time, not including your own? _____

Yes No Does your business include the use of commercial vehicles?
If yes, how many and what type? _____

Yes No Do you currently have a sign promoting your business on the premises?
If yes, what is the size and location of your sign? _____

Yes No Does your business produce any offensive noise, vibration, smoke, dust, or odors beyond the boundaries of the property?

Yes No Do you utilize any accessory buildings on your property for your home occupation?

Yes No Do you display any goods for retail sale (customers look, choose, and buy)?

Yes No Will there be employees for the business, other than residents of the home?
If yes, how many? _____

Yes No Will people be coming to the home to transact business?

Yes No Home Occupation Business exempt? Why _____

What type of impact will this business have on the residence? _____
