



<input type="checkbox"/> Home Occupation	<input type="checkbox"/> New Business
<input type="checkbox"/> Commercial	<input type="checkbox"/> Renewal
<input type="checkbox"/> Other	

Business License Application
 520 S 500 E, River Heights UT 84321
 435-752-2646

Business Name: _____ Business Phone Number: _____
 Business Address: _____ Mailing Address: _____
 Name of Business Owner: _____ Phone Number: _____
 Owner's Home Address: _____ Email: _____
 Description of Business: _____

Number of Employees: _____ Business Hours: _____
 Are you legal to work in the US? YES NO Year business began: _____
 Will food be served? (circle one) YES NO If yes, provide copy of establishment permit.
 Does your business sell products? YES NO If yes, State Sales Tax Number: _____
 Do you have employees besides yourself? YES NO If yes, FEIN number: _____
 Are you State licensed? YES NO If yes, license number: _____
 Type of License: _____ Expiration Date: _____

All businesses shall be operated in compliance with the River Heights City Ordinance and any conditions set forth. License may be revoked or refused upon failure of the owner and/or operator to maintain the business in accordance with the standards and zoning requirements set forth at the time of approval. **All licenses expire December 31st of each year. Unpaid fees on January 1 are subject to a \$30 late fee.**

It is the responsibility of the licensee to notify the City Office if they move, change their mailing address or close their business.

I certify that all of the above information is true and understand that any false or incomplete information can cause a license to be denied or the existing business to be closed. Further, I agree to abide by all conditions of the River Heights City business license ordinance.

 Signature Date

Fees:	Home Occupation	In home	\$50	Renewal	\$40
	Home Occupation	Fire inspection needed	\$80	Renewal	\$60
	Commercial	Less than 10,000 sqft	\$150	Renewal	\$150
	Commercial	10,000 sqft or more	\$250	Renewal	\$250

Fee paid: _____ Date: _____ Receipt #: _____ Late Fee: _____ License #: _____