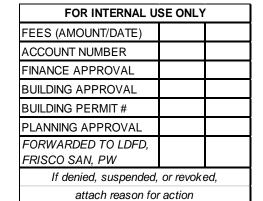
Post Office Box 4100 Frisco, CO 80443 PHONE (970) 668-5276 FAX (970) 668-0677





APPLICATION FOR BUSINESS / SALES TAX LICENSE

The Town of Frisco welcomes you to its business community and thanks you for your cooperation in fully completing this application, which provides us with necessary information regarding business activity in Town of Frisco.

Please Complete in Full

1.	Legal Name of Business/Doing Business As (If different):					
2.	Physical Address of Business: Please contact the Community Development Department at (970) 668-5276 if your business is considering relocation.					
3.	Mailing Address of Business:					
4.	Business Telephone: Fax Number:					
5.	E-Mail Address: Website Address:					
6.	Describe in detail the nature of your business or service. Submit written approval from the Sumi County Environmental Health Department if your business handles or sells any food items.					
7.	Name and Address of Owners: (List all Officers/Directors – use an additional sheet if necessary):					
8.	List any compliance certificates your business is subject to including federal, state or other loca agency registration and/or licensing requirements:					
9.	List any municipalities where your business is licensed other than Frisco:					
10.	List any municipalities where your business license has been denied, revoked or suspended including circumstances:					
11.	State Sales Tax Number:					
	Requested Local Filing Frequency:MonthlyQuarterlyAnnually					
12.	Are you submitting this application as a sole proprietor? State law requires proof of lawful presence in the United States prior to receipt of public benefit if y have submitted this application as a sole proprietorship . Please request a Lawful Present Affidavit and provide proof of identification with your affidavit.					

BUSINESSES PHYSICALLY LOCATED IN FRISCO MUST ANSWER QUESTIONS 13 THROUGH 18 AND SUBMIT PROOF OF PREMISE

	If your business is serviced by an alarm monitoring company, please provide the name and phone					
n	number of service provider:					
	. Please provide a list of after-hours emergency contacts: If possible, please furnish two local number within Summit County (please list in the order you want people called).					
	. Name/Phone					
	. Name/Phone _ . Name/Phone _					
15. W	What is the floor area	floor area square footage of your business space?				
16. Will you be making any physical changes to the building or business space?						
	If yes, please describe:					
17. Is	7. Is your business located in your home?					
	If yes, is the business a home office with the following characteristics?					
18. lf _	The home office is for business use by the home resident(s) and occupies no more than 30% of the gross floor area of the dwelling unit. Business in the home office is primarily conducted by phone, internet, and/or mail; and the physical address of the home office is not advertised. There are no on-site employees and no more than four customer visits per day. Deliveries do not exceed normal residential volumes. There is no signage or advertising, audible noise, detectable vibration or odor, and no electrical interference associated with the business outside of the home. 8. If the business is temporary or seasonal, please specify expected dates of operation:					
		PRO-RATED FEE SCHED		1		
		JANUARY	\$75.00			
		FEBRUARY	\$68.75	1		
		MARCH	\$62.50			
		APRIL	\$56.25			
		MAY	\$50.00			
		JUNE	\$43.75			
		JULY	\$37.50			
		AUGUST	\$31.25			
		SEPTEMBER	\$25.00			
		OCTOBER PLUS NEXT YEAR	\$93.75			
		NOVEMBER PLUS NEXT YEAR	\$87.50			
		DECEMBER PLUS NEXT YEAR	\$81.25			
				I		
know Frisc by o www	rledge. I further ce o Licensing of Bus contacting the .townoffrisco.com	statements made on this application rtify that it is my responsibility to obsiness Code. I have been advised the Fown Clerk at (970) 668-5276. I understand that the local code edge and my business license could be	tain, read, and at a copy of thi or on the enforcement off	understand the Town of s code may be obtained Town's web site at ficer will issue citations		
Autho	orized Signature	 Title		Date		

PLEASE SUBMIT SIGNED APPLICATION, ANY ADDITIONAL SUPPORTING DOCUMENTATION, AND NON-REFUNDABLE APPLICATION FEE PAYABLE TO THE TOWN OF FRISCO. BUSINESS LICENSES ARE ISSUED ON A JANUARY 1 $^{\rm ST}$ THROUGH DECEMBER 31 $^{\rm ST}$ SCHEDULE.