

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

FOR INTERNAL USE ONLY		
FEES (AMOUNT/DATE)		
ACCOUNT NUMBER		
FINANCE APPROVAL		
BUILDING APPROVAL		
BUILDING PERMIT #		
PLANNING APPROVAL		
FORWARDED TO LDFD, FRISCO SAN, PW		
<i>If denied, suspended, or revoked, attach reason for action</i>		



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 Summit 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 local 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: _____ Monthly _____ Quarterly _____ Annually
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 you have submitted this application as a **sole proprietorship**. Please request a Lawful Presence 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**

13. If your business is serviced by an alarm monitoring company, please provide the name and phone number of service provider: _____

14. Please provide a list of after-hours emergency contacts: If possible, please furnish two local numbers within Summit County (please list in the order you want people called).

- 1. Name/Phone _____
- 2. Name/Phone _____
- 3. Name/Phone _____

15. What is the 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 your business located in your home? _____

If yes, is the business a home office with the following characteristics? _____

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.

18. If the business is temporary or seasonal, please specify expected dates of operation:

PRO-RATED FEE SCHEDULE	
JANUARY	\$75.00
FEBRUARY	\$68.75
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 hereby certify that the statements made on this application are true and correct to the best of my knowledge. I further certify that it is my responsibility to obtain, read, and understand the Town of Frisco Licensing of Business Code. I have been advised that a copy of this code may be obtained by contacting the Town Clerk at (970) 668-5276 or on the Town's web site at www.townoffrisco.com. I understand that the local code enforcement officer will issue citations for violations of this code and my business license could be subject to revocation.

Authorized 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 1ST THROUGH DECEMBER 31ST SCHEDULE.