



TOWN OF PAGOSA SPRINGS BUSINESS LICENSE APPLICATION

Please submit completed and signed form to the Town Clerk's Office
551 Hot Springs Boulevard or mail to PO Box 1859, Pagosa Springs, Colorado 81147.

License #

Date: New RENEWAL SUPPLEMENTAL (changes or more than one location)

DBA (Doing Business As) Name:		Business Legal Name:
Primary Owner Name (Last, First, Middle):		Physical Business Address:
Other Owner Name (Last, First, Middle) (if any):		Business Mailing Address:
Additional Physical Business Address (if any):		Business Phone #:
NAICS or SIC Code:		Business FAX #:
Colorado State Sales Tax #:		Business E-Mail :
Primary Contact Name/Position:		Primary Contact Phone #:
Year Business Established:	Number of Employees:	Building Square Footage: (If located within Town)

MARK ALL THAT APPLY:

Residential Business (Home-based), Seasonal (3 months to 6 months), Retail Business, Service Business, Non-Profit

TYPE OF OWNERSHIP:

Corporation Limited Liability Company Partnership Sole Proprietorship Franchise
 Nonprofit Corporation (Proof of 501(c)(3) required, No fee) Other _____

DESCRIPTION OF BUSINESS:

(Include Nature of Business, Types of Products and Services to be Provided)

Days of Operation: _____ Hours of Operation: _____ Dates of Operation: _____

- Is your business a change of use/occupancy for this location? Yes No
- Will there be any remodeling or building alterations? Yes No
- Does business utilize any hazardous, toxic or flammable materials? Yes No
- Will you be installing a new sign or changing an existing sign? Yes No
- Have you applied for a sign permit? Yes No

OTHER LICENSES REQUIRED:

Liquor License, Contractors Work Permit, Lodger's Tax License, Pawn Broker's License,
 Health Department License, Other Required License _____

<u>FEE'S</u>		<u>SCHEDULE</u>	
New Business Application Fee	\$25	New Business Application Fee	\$
+ Plus Class FEE Below	+	+ Business License "Class Fee" +	\$
Class 1 - Businesses with 0 - 10 employees	\$25	=	Total Due =
Class 2 - Businesses with 11-20 employees	\$40	TOTAL PAID	\$
Class 3 - Businesses with 21+ employees	\$50	Date Paid:	Received By:
Class 4 - Seasonal Business	\$20	Customer Notified	Approved <input type="checkbox"/>
			Denied <input type="checkbox"/>

PROCESS

- (1) Return Completed Application to the Town Clerk's office with your FEE (970-264-4151 x225 for your fee)
In person to: **551 Hot Springs Boulevard** or
mail to: **Pagosa Springs Business License, PO Box 1859, Pagosa Springs, Colorado 81147-1859.**
- (2) Application will be forwarded for Department Approvals.
- (3) Building department will perform a physical inspection of the business.
- (4) Business License is Issued & Mailed to Business Contact. *Processing time varies (up to thirty (30) days).*
- (5) Post License with other required license in a Conspicuous Place at Business Location,
OR carried on person if business has no premises.

Business Name: _____ Address: _____

IMPORTANT – PLEASE READ

- ~ All vocations, occupations, professions, enterprises, establishments, home occupations, and all other kinds of business activities and matters (including sales of tangible personal property and furnishing of services) conducted for private profit, gain, pecuniary benefit or advantage, either directly or indirectly within the Town are required to obtain a business license. (Mere delivery within the Town of any property purchased or acquired from a regular place of business outside the Town shall **not** be considered to be the conducting of business, ie.. UPS, FedEx, DHL)
- ~ Non-profits organizations such as, established religious organizations, charitable corporations, public schools, federal, state, or local government agency that is exempted by state law from collecting municipal taxes must complete a business license but are exempt from fees.
- ~ An individual conducting an occasional yard or garage sale is exempt from both the licensing and fee requirements.
- ~ Businesses properly licensed pursuant to Section 6.3 of the Pagosa Springs Municipal Code are exempt from both the licensing and fee requirements.
- ~ Change of ownership of an existing business, change of business name, change in the nature of the business or services provided, or businesses that move from a Town location to another Town location are required to submit a **supplemental license application**. There is no fee for a supplemental license. All Business License Required to be Renewed ANNUALLY.
- ~ Future remodels or alterations must be reviewed by the Town’s Planning/Building, Sanitation & Fire Department.
- ~ Town sign code requires review and approval before signage, including temporary signs (banners, ect.), can be erected.
- ~ Continued compliance with Town and Fire Codes must be maintained at all times.
- ~ Fire inspection shall be conducted by Pagosa Springs Fire Protection District.
- ~ Town officials charged with enforcing municipal code may conduct inspections during regular business hours.
- ~ All corrections must be complete before a license is issued.

I understand An Approved & Issued “BUSINESS LICENSE” is Required to Conduct Business within the Town of Pagosa Springs. I fully understand and will comply with all the rules and regulations of the Town of Pagosa Springs Municipal Code. It is my responsibility to acquire all necessary Approvals for this Application, and to submit completed Application ANNUALLY with appropriate Fees to the Town Clerk. Finally, this application is complete and correct to the best of my knowledge.

Signature of Applicant _____ Print Applicant Name _____ Title _____ Date _____

~ IF PHYSICAL ADDRESS LOCATED WITHIN TOWN LIMITS, ALL FOLLOWING APPROVALS ARE REQUIRED ~

~ OFFICE USE ONLY ~

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Town of Pagosa Springs Planning Department: 264-4151 x224, for planning Department.

Zoning Correct? Yes No CUP# _____ Variance# _____ Date: _____ Conforming Sign: Yes No
 Approved Deny Held **Planning Signature:** _____ Sign Permit Issued: Yes No
 Comments: _____

Town of Pagosa Springs Building Department: 264-4151 x234, to request a “Business License” Inspection.

Change of Occupancy or Use ? Yes No OLD Occupancy: _____ NEW Occupancy: _____
 Approved Deny Held **Building Official:** _____ Date: _____
 Comments : _____

In District, Town of Pagosa Sanitation Department: Phil Starks 264-4151 x230, to Schedule an Inspection.

Unit of Measure: _____ OLD Occupancy: _____ NEW Occupancy: _____
 Change of Occupancy or Use ? Yes No Current ERT’s Assessed: _____ NEW ERT’s Assessed: _____
 Approved Deny Held **Sanitation Signature:** _____ Date of Review: _____
 Comments : _____

Pagosa Springs Fire Department: Manny Trujillo 731-4191, to Schedule an Inspection.

Fire Inspector Signature: _____ Date of Inspection: _____
 Approved Deny Held
 Comments : _____