

Business License Application

Revenue Division - Sales Tax 8101 Ralston Road P.O. Box 8101 Arvada, CO 80001-8101 Phone (720) 898-7100 Fax (720) 898-7110

www.arvada.org

	Business located in: Commercial E	Building (Out of City	_ Private Res	sidence
Type of Application	New Business License Change/Update Account Account Number	P	Asset Purchase? Stock Purchase? or Business	ss? Yes Yes I Yes I	No
	Trade Name of Business (<u>D</u> oing <u>B</u> usiness <u>A</u>	s) V	Vebsite Address		
	Legal Name of Business				
	Pusinees Location Address (CANNOT ACCEPT	DO DOY)			
	Business Location Address (CANNOT ACCEPT	PO BOX)			
	Street Unit Business Location Phone #		cation Contact P	St	Zip
	business Location Phone #	Business Lo	cation Contact P	erson	
	Business Location Fax #	Contact E-m	ail Address		
u C	()				
mati	Federal Identification Number		Colorado Sales T	ax Number	
nfor	Mailing Address (Tax Return), if different than location				
SS	Street Unit		Nia.	St	7:-
	Street Unit		city Contact Bor		Zip
nsin	Mailing Address Phone #	Mailing Addr	ess Contact Fer		
Business Information	Mailing Address Phone # ()	Mailing Addr	ess Contact Fer		
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	Mailing Address Fax # () Date Started or Will Start in Arvada Nature of Business - Description of Sales or second to the sec	Contact E-m Activities (Please I	ail Address be specific) rinted Sales & Ine Wholesale Professional / Se Government	Jse Tax Return	?
Nature of Business (Check all that apply)	() Mailing Address Fax # () Date Started or Will Start in Arvada Nature of Business - Description of Sales or A How would you like to re Mail E-Mail Retail Manufacturing	Contact E-m Activities (Please I	ail Address be specific) rinted Sales & IneI	Jse Tax Return	?
	Mailing Address Fax # () Date Started or Will Start in Arvada Nature of Business - Description of Sales or second to the sec	Contact E-m Activities (Please I	ail Address be specific) rinted Sales & Une Understand / See Professional / See Government Non-Profit	Jse Tax Return	

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Ē	Select only one and complete the appropriate section below						
Ownership Information	Individual/Sole Propri	ietorship					
forn	Partnership (including	g General, LP, LLP, I	_LLP, LPA)	$\overline{\Box}$			
nl di	Corporation/Sub S C	orporation		$\overline{\Box}$			
ırshi	Limited Liability Com						
wne			olorado Exemption Ce	artificate)			
0	14011-1 10111 30 1(0)3 0	gariization (attach c	olorado Exemption de	ertificate)			
sole hip	Name of Owner						
Individual / Sole Proprietorship	Contact Address						
ivid	Street	Unit #	City	St	Zip		
Ind	Contact Phone #						
	()						
	Name of Corporation/Sub S Corp	ooration, Limited Liak	oility Company, or Part	tnership			
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oany	Contact Name	Title	e / Position	Contact Ph	none #		
omp	Contact Address			()			
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poration, Limi or Partnership							
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on/Sub S Corporation, Limited Liability Company, or Partnership	Street Registered Agent - The Individu	Unit # ual or Business Resp	City onsible for Accepting	Service of Process for	Zip an Entitv.		
	Name			Phone #	,		
Corporat	Address			()			
ŭ	Street						
	Street	Unit #	City	St	Zip		
c)3	Name of Organization			Exemption 98	ı #		
Non-Profit 501(c)3 Organization	Contact Name	Titl	Phone #				
ofit a	Address			()			
n-Pr Orga	0.						
S .	Street	Unit #	City	St	Zip		
ner	Name of Owner						
Property Owner	Contact Address						
perty	Street	Unit #	City	St	Zip		
Pro	Contact telephone #	Afte	er hours contact teleph	none #			

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Other In-City Business Information Internal Use Only	If renting, what is the What is the Does the buf so, Alarm	t or own the Business Loca when does the lease expire? e approximate square footage number of employees at the usiness use an Alarm System Company name mmable or toxic materials/of e describe in detail	ge of the Business Location e Business Location em Company?	Yes Phone # site? Yes	 No
Filing Frequency Requested		Reporting Fre	Monthly - Taxes du Quarterly - Taxes d Annual - Taxes due quency is subject	lue of \$59 or less	s per month
Signature	I declare, under penalty of perjury, (1) that this application has been examined by me, (2) the statements are made in good faith pursuant to the City of Arvada tax laws and regulations and to the best of my knowledge and belief, are true, correct and complete and (3) I am lawfully present in the US and will provide evidence of lawful presence if requested.				
J,	Authorized Print Name		Title		Date
	, intrivaint	,			
July	Code Enfo				enialenial
se O		Type of Business			7
ity U		Business Start Date			
or C		Type of Ownership			
on f		Reporting Frequency			Date Entered
This Section for City Use Only		Business License Issued]
his (SRT Account # Issued			
]
_		Industry Code			Entered by
		Industry Code Center Code			Entered by
1					Entered by

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Home Based Business Supplement

	How many employees work in your home who do not live in the home?
Only	How many employees report to your home for job related information or supplies?
ation	How many vehicles, associated with your business, park at this location?
Occupation	Do you have supplies, material, stock or an office located in a garage, shed or other out-building? Yes No
	If yes, please describe
For Home	Do you have any business related equipment stored outside your residence? Yes No If yes, please describe the items, and where/how they are stored.

5.3.4 **Home Occupations** PLEASE READ CITY OF ARVADA'S MUNICIPAL CODE ON HOME OCCUPATIONS All permitted home occupations shall comply with the following standards and conditions: A. <u>Development Standards</u> The use is conducted entirely within the dwelling and not in any accessory building and is carried on only by inhabitants thereof and no others. The entrance to the space devoted to such use shall be from within the dwelling, 2. unless otherwise required by state law or regulation. 3. The use does not require internal or external alteration or involve construction features not customary in a dwelling. 4. No stock in trade is kept or commodities sold except such as are made on the premises. This does not include the storage of stock or commodities which are sold off the premises. 5. The use does not require internal or external alteration or involve construction features or use of mechanical equipment not customarily in a dwelling. The use is limited to electric motors for power, with a total limitation of three (3) 6. horsepower. 7. The use does not create any offensive noise, vibration, smoke, dust, odors, heat or glare noticeable at or beyond the property line. 8. The use shall not change the character of the dwelling or create outside the dwelling any external evidence, either on the property or on the street, of the operation of the home occupation, except for one non-illuminated sign, having an area of not more than one square foot, which shall be attached flat against the dwelling. A garage or other accessory building shall not be utilized for, or in conjunction with, a home occupation. 9. There shall be no exterior/outside storage on the premises of material or equipment used as part of the home occupation. The use shall not create any significant traffic burden within the immediate area. 10. 11. All parking needs created by all home occupations shall be accommodated by offstreet parking and shall not exceed the parking capacity of the existing and available parking facilities located on the property. No more than two vehicles that are associated with the home occupations at the dwelling may be parked on-site

I have read the home occupations municipal code 5.3.4 and understand I must comply with the stated Compliance standards and conditions listed above. Home business owners authorized signature Date

at any one time.

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