

# Town of Hot Sulphur Springs

C O L O R A D O

## TOWN OF HOT SULPHUR SPRINGS APPLICATION FOR BUSINESS LICENSE

1. Name of Applicant: \_\_\_\_\_
2. Name of Business: \_\_\_\_\_
3. Mailing Address: \_\_\_\_\_
4. Physical Location of Business: \_\_\_\_\_
5. Phone numbers for the Applicant/ Business: \_\_\_\_\_
6. Email Address: \_\_\_\_\_
7. Website Address: \_\_\_\_\_
8. Send a jpg file of your logo to [TownofHSS@comcast.net](mailto:TownofHSS@comcast.net) to be featured on the [www.HotSulphurSpringsCO.com](http://www.HotSulphurSpringsCO.com) website
9. Verify that you have checked and that the business complies with the following requirements of the Town Code:
  - Use Permitted by Zoning
  - Signage
  - Off street parking
  - Setbacks
10. Individual or Entity
  - Individual
  - Entity: if entity, please identify form of entity: \_\_\_\_\_
11. If applicant is other than an individual, names and addresses as follows:
  - a. For corporations, the officers and registered agent of the entity
  - b. For partnerships, each partner
  - c. For LLC's each manager and the registered agent.Attach additional sheets if necessary  
Name(s)            Title            Address  
\_\_\_\_\_  
\_\_\_\_\_
12. Nature of business: \_\_\_\_\_  
If retail, description of items sold: \_\_\_\_\_  
If seasonal, months in which business will be conducted: \_\_\_\_\_
13. Colorado Department of Revenue Sales Tax License Number: \_\_\_\_\_
14. \$50.00 Business License Fee is remitted with this application. Fees not prorated. Licenses expire on December 31<sup>st</sup> of each calendar year. License holders are responsible to apply for renewal each calendar year.
  - \$50.00 Business License Yearly Fee

I declare under penalty of perjury that I have reviewed this application and that the above statements are true and complete. I represent that I have received and reviewed a copy of the Town Code governing Business Licenses and acknowledge the obligation to comply with such provisions as well as all other provisions to the Town Code and the state statute.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Applicant's Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
TOWN USE ONLY BELOW THIS LINE

Town Business License Number: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Issued By: \_\_\_\_\_

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