



P.O. Box 249, Del Norte, Colorado 81132  
Website: delnortecolorado.com

719-657-2708

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***Business License Application***

A business license will not be issued to any business not compliant with Zoning District Regulations. Failure to comply with Zoning District Regulations or misrepresentation of any statement on the application voids an issued business license immediately. *New License requires a copy of Colorado State Sales Tax License.*

This Application is for a:  New License  Renewal License      Annual License Fee: \$ 50.00

State Sales Tax License Number: \_\_\_\_\_ Federal ID (if applicable) \_\_\_\_\_

Type of Business Ownership:     Sole proprietor  
   Partnership (not husband and wife)  
   Corporation  
   Limited Liability Company

Business meet Local Zoning Regulations:  Yes  No

Name of Business Entity (Corporation, LLC, etc): \_\_\_\_\_

Name of Business (DBA): \_\_\_\_\_

Description of Business: \_\_\_\_\_

Physical Address of Business: \_\_\_\_\_

Mailing Address of Business (if different): \_\_\_\_\_

Business Phone Number: \_\_\_\_\_ Business Fax Number: \_\_\_\_\_

After-hours emergency number and contact name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of Business Owner/President/Member: \_\_\_\_\_

Address of Business Owner: \_\_\_\_\_

Local Manager (if not owner): \_\_\_\_\_

X \_\_\_\_\_  
(Applicant Signature)

\_\_\_\_\_  
(Date)

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Office Use Only    Date: \_\_\_\_\_    License No: \_\_\_\_\_