

**2012 - BASALT BUSINESS LICENSE APPLICATION
AND SALES TAX LICENSE APPLICATION**

**TOWN OF BASALT
101 MIDLAND AVENUE
BASALT, CO 81621
(970) 927-4701 FAX: (970) 927-4703**

Town of Basalt Use Only:

Check No. _____ License No. _____
Planning Department:
Approved: _____ Denied: _____
(Use back of application to list conditions of
Approval - if any - or reasons for denial)

“ANY PERSON, FIRM, ASSOCIATION, PARTNERSHIP OR CORPORATION ENGAGED IN ANY PROFESSION OR OCCUPATION WITHIN THE TOWN OF BASALT MUST OBTAIN A BUSINESS LICENSE.”

Exemptions include day care centers, schools, Town-licensed contractors, non-profit corporations and non-retail home occupations.

Sales Tax Licenses apply to all retail sales operations or businesses.

Businesses with multiple locations, and locations with multiple businesses, must have separate licenses for each business. **Contractors** should obtain a contractor's license to work in the Town of Basalt, in lieu of a business license.

FEE CATEGORIES: Check the appropriate category and attach the fee.)

_____ **\$10.00 Sales Tax License only:** Home occupations, non-profit corporations, special event participants, market vendors and licensed contractors who sell at retail must have a sales tax license. Annual fee is \$10.00.

_____ Winter Market _____ 2012 Sunday Market Other _____

_____ **\$25.00 Business License only:** Professions, occupations, or businesses that do not involve retail sales and are not exempt, must have a business license. Annual fee is \$25.00.

_____ **\$35.00 Retail Business and Sales Tax License:** Businesses, restaurants and licensed liquor establishments must have a \$25.00 Town business license **and** a \$10.00 Town sales tax license. Annual fee is \$35.00.

☛ **If paying by credit card, please call the information in to Town Hall at 927-4701.**

PLEASE COMPLETE THE FOLLOWING:

Corporate Name: _____ dba: _____

Business Phone: _____ Number of Employees: _____

Nature of Business: _____

Business Owner Name: _____

Owner Contact Info: Home Phone: _____ Cell _____

Business Mailing Address: _____

City, State, Zip: _____ E-mail: _____

Business Physical Address: _____

City, State, Zip: _____

Alarm Company (if applicable): _____

Emergency Contact (IF DIFFERENT THAN OWNER): _____ Emergency No.: _____

State Sales Tax Number (Retail Business, Licensed Liquor Establishments): _____