

## 5580 W. 4600 S. Hooper UT 84315 (801)732-1064 Fax: (801)732-0598 hoopercity@hotmail.com

## **BUSINESS LICENSE APPLICATION**

License No:		
□ New Business □ Renewal		
Date Submitted:		

Please clearly print or type. Incomplete applications will not be accepted. Application must be passed prior to opening you business. All Federal and State numbers and fees must be submitted at time of turning in application. All business licenses expire on December 31st.

## **SECTION I: Business Information**

Business Address:		Business Phone:		
Mailing Address:		Secondary Phone:		
Website:		Email:		
		Would you like to receive info	ormation and updates by email? Ye	s No
ease check one of the following				
□ Auto	☐ Development/Construction	☐ Landscaping	☐ Salon/Tanning	
□ Child Care	☐ Financial Services	☐ Manufacturing	☐ School/Preschool	
☐ Computer/Consulting	☐ Florist/Nursery	☐ Photography	□ Other	
□ Contractor	☐ Gym/ Spa/ Nutrition	☐ Restaurant/Bakery		
☐ Counseling/Consulting	☐ Handyman	□ Retail		
	SECTION II Federal and	d State Requirements		
ne nearest State Tax Commission offi	·	or 2540 Washington Blvd, Ogde		
ne nearest State Tax Commission offi State Sales Tax No: Federal ID (EIN) No:	ce can be reached at (800-662-4335)	or 2540 Washington Blvd, Ogde	n.	
ne nearest State Tax Commission offi State Sales Tax No: Federal ID (EIN) No: If Contractor (Handyman, Electrical, Pl	ce can be reached at (800-662-4335)  Business Entity N  Employer Withho	or 2540 Washington Blvd, Ogde	n.  Expires:	
ne nearest State Tax Commission offi  State Sales Tax No:  Federal ID (EIN) No:  If Contractor (Handyman, Electrical, Pl  State License Type (if any):	ce can be reached at (800-662-4335)  Business Entity N  Employer Withhouth	or 2540 Washington Blvd, Ogde lo:  blding No:  Expir	enExpires:	
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re nearest State Tax Commission office State Sales Tax No:  Federal ID (EIN) No:  If Contractor (Handyman, Electrical, Plance State License Type (if any):  Federal License Type (if any):  State/County Permit Type (if any):  **PLEASE Material Business Owner:	Business Entity N  Employer Withhoumbing or Mechanical No):  No:  No:  No:  SECTION III: Owner/I	or 2540 Washington Blvd, Ogde lo: Expir Expir Expir Expir UIRED LICENSES/PERMITS WITH Manager Information	en.  Expires:  res:  es:  APPLICATION**	
re nearest State Tax Commission office State Sales Tax No:  Federal ID (EIN) No:  If Contractor (Handyman, Electrical, Plance State License Type (if any):  Federal License Type (if any):  State/County Permit Type (if any):  **PLEASE Material Business Owner:	Business Entity N  Employer Withhoumbing or Mechanical No):  No:  No:  No:  No:  Home Ac  Email Address:	or 2540 Washington Blvd, Ogde lo: Expir Expir Expir Expir UIRED LICENSES/PERMITS WITH Manager Information	en.  Expires:  res:  es:  APPLICATION**	

## **SECTION IV Business Description**

☐ Commercial Business	Describe Business In Detail (Products, Vehicles, Stor	rage, Equipment, Employees, Deliveries, Patrons, etc.)			
☐ Home Business					
☐ Daycare/Preschool					
	APPLICANT'S AGREE	MENT_			
This form is an application	for a business license. The actual license will be issu	ed only when the business is in compliance with all local, state,			
_	odes and all inspections are completed and signed of may significantly increase approval time.	ff by the various City departments. Missing or incomplete infor-			
The above-mentioned info	ormation is truthful and correct to the best of my kno	wledge. I, the undersigned, hereby agree to conduct said busines			
strictly in agreement with	all Hooper City laws, code and state requirements fo	r said business, and that no other type of business will be conduct			
	en listed above. It is the responsibility of the license	e to renew the license, failure to receive notice does not excuse			
responsibility.					
Business Owner Signature	:	Date:			
	Business License	e Fee			
	☐ Home Business	\$75.00			
OFFICE USE ONLY					
******	*************	**********			
Date Approved:	License #:	City Council Date:			
Amount Paid:	☐ Cash ☐ Credit Card ☐ Check#				
- BUILDING DEPARTMENT	-				
Health/Fire/Safety Inspect	tion required: $\square$ YES $\square$ $NO$ $\mid$ If yes, date passed:				
Meets Applicable Codes &	Regulations: $\square$ YES $\square$ NO If yes, date passed:				
Comments:					