

**TOWN OF ORDERVILLE
APPLICATION FOR BUSINESS LICENSE**

NAME OF BUSINESS _____ Date _____

Name of Applicant _____
(Give name of individuals. If partnership or corporation, state position.)

Residence Address of Applicant _____ City _____ Phone _____

Mailing Address/PO Box _____ City _____ Zip _____

Address at which Business will be conducted _____ Phone _____

Type of Business/Profession _____

Utah Sales Tax ID Number # _____

Does applicant sell beer or other alcoholic beverages? _____
On-premise _____ Off-premise _____ Are you aware that you also need a state license
for on-premise before sales may take place? _____

Does applicant own the property where Business is located? _____ Rent _____

Is applicant sole owner of the Business? _____ If not, names and addresses of other owners (of if corporation or
partnership, other officers or general partners). _____

Date of commencing business in Orderville _____

Average number of employees _____

LICENSE FEE PAYABLE

GENERAL BUSINESS LICENSE \$25	\$ _____
BEER LICENSE (ON OR OFF PREMISE)	\$ _____
TOTAL LICENSE FEE DUE	\$ _____

Date paid _____ Check No. _____
Received by _____

I understand that falsifying any information on this application constitutes sufficient cause for rejection of my application or revocation of my license. I also understand that the Town Council may require additional information as permitted by the Ordinance, and I agree to supply the same upon request as part of this application.

Signature _____ Date _____