



Town of Ault
201 1st Street
P.O. Box 1098
Ault, Colorado 80610

\$10.00 License Fee

Date Rec'd: _____

Payment Method:

BUSINESS LICENSE APPLICATION

If, after such notice, a business has failed to register within thirty days, it shall be in violation of Ordinance 468 and may be cited and fined in the amount of \$10.00 for each month or portion of a month thereafter until registration is completed.

Owner Name: _____ **Contact Number:** _____

Owner Address: _____

City

State

Zip

Type of Ownership:

☐ Individual ☐ Partnership ☐ Corporation ☐ Association ☐ LLC

☐ Other _____

Business Name: _____

Business Location: _____

Mailing Address: _____

Business Phone: _____

Emergency Contact: _____ **Title:** _____

Emergency Number: _____

Email Address: _____

Type of Business: ☐ Retail ☐ Wholesale ☐ Service

Date Business Began or Purchased: _____

Product Sold/Service Provided: _____

Hours of Operation: _____ **Number of Employees:** _____

Number of Vehicles on premises daily: _____ **Type of Vehicles:** _____

Streets, Avenues, Highways Traveled: _____

Are Hazardous materials stored on property? ☐ Yes ☐ No

If yes, what type and how are they stored? _____

"I declare the information provided in this application is true and complete to the best of my knowledge."

Applicant's or Agents Signature

Title

Date