

970-351-0041

Fax 970-351-6549



621 27th Street Road

Garden City, CO 80631-8466

Business License Application

Please fill out both sides of this form and return to the Town Hall with the appropriate fees. If you have any questions, please call the Town Hall at 351-0041.

Corp/LLC/Ind Name: _____ DBA: _____

Street Address	City	State	Zip Code
----------------	------	-------	----------

Mailing Address, if different	City	State	Zip Code
-------------------------------	------	-------	----------

Phone Number: _____ Fax Number: _____

E-Mail Address: _____

Business Hours and Days of Operation: _____

Is the public allowed to come into your business to make purchases? _____

Do you sell reconditioned materials? _____

Do you sell at wholesale? _____

Do you sell at retail? _____

Do you pay Colorado Sales Tax? _____ State of Colorado sales tax number: _____

Property Owner(s): _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Date	Signature of Applicant
------	------------------------

You are responsible for notifying us of any changes.

Call Town Hall for fee or check the fee schedule on our website. You can also bring this form to the Town Hall with payment.

Fee: _____

If you have a physical business location in Garden City, Page 2 is required. If not, skip to Page 3.

POLICE DEPARTMENT – RESPONSIBLE PARTY INFORMATION

Business Name: _____ Business Phone: _____

Address: _____

Type of Business _____

Business Owners: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Manager's Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Responsible Persons: Have access to business after working hours. *Please notify Police of any changes.*

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Alarm Information: Does the business have a fire or burglary alarm?

Alarm type: Auto Dialer/Third Party Outside Audible Silent Alarm Panic Button

Monitored by Security Company? _____

Security Company: _____ Address: _____ Phone: _____

Miscellaneous Information:

How many entry and exit doors are in the building? _____ Locations: _____

Is alcohol stored in the building? _____ Locations: _____

Are drugs stored in the building? _____ Locations: _____

Are weapons stored in the building? _____ Locations: _____

In case of emergency, notify:

Name: _____ **Address:** _____ **Phone:** _____

The following program is being offered to you as a public service by law enforcement:

Physical Security Check _____

AFFIDAVIT OF ELIGIBILITY

Colorado law requires that only persons lawfully present in the United States (US) be issued a license, certificate, registration or permit. You must complete the affidavit below. When requested, you must produce the valid identification.

Section A: LAWFUL PRESENCE in the United States.

I, (please print your full name) _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check 1 or 2 below):

1. _____ I am a US citizen.

2. _____ I am not a US citizen and I am lawfully present in the US pursuant to federal law.
 - a. _____ I am a qualified alien as defined in 8 U.S.C. section 1641

 - b. _____ I am a nonimmigrant under the 'Immigration and Nationality Act', Federal Public Law 82-414 as amended

 - c. _____ I am an alien who is paroled into the US pursuant to 8 U.S.C. section 1182(d)(5)

Section C: Attestation.

_____ I understand that this sworn statement is required by law because I have applied for a professional or commercial license regulated by 8 U.S.C. sec. 1611. I understand that state law requires me to provide proof that I am lawfully present in the United States when asked.

_____ I understand that in accordance with sections 18-8-503 and 18-8-501(2)(a)(I), C.R.S., false statements made herein are punishable by law. I state under penalty of perjury in the second degree, as defined in 18-8-503, C.R.S, that the statements above are true and correct.

_____ I am the person identified above and that the information contained herein is true and correct to the best of my knowledge. I understand that under Colorado law, providing false information is grounds for denial, suspension or revocation of a license, certificate, registration or permit.

_____ I understand that the above information must be disclosed to the Department of Regulatory Agencies upon request and is subject to verification.

Signature

Date

Incomplete forms will not be processed.