



COALVILLE CITY
 10 North Main
 PO Box 188
 Coalville, UT 84017
 (435) 336-5981

Office Use Only Rev 04/10

New
 Late Fee _____
 Cash/ Check _____
 License # _____
 County _____

Business License Application: Home Occupation

Name of Business _____

Business Phone No. _____

Business Address _____

Fax Number _____

Mailing Address _____

State Registration # _____

City _____ State _____ Zip _____

Do you have a Federal ID No.? (check one)

Yes _____ No _____

Opening date of business _____ # of Employees _____

Contractor # _____

New Business

Organization Type: (circle one)

New Owner

Corporation Partnership Proprietorship LLC

New Location

Applicant Information

Owner Name _____

Owner Phone Number _____

Address _____ City _____

State _____ Zip _____

Birth Date _____

Length of Time Lived in Coalville _____

Email _____

Property Owner Information

Property Owner Name _____

Phone Number _____

Address _____ City _____

State _____ Zip _____

I, as a property owner, hereby certify that all portions of my home for this business are legal with appropriate building permits.

Property Owner Signature _____

Detailed Description of Business _____

Please complete the following

1- Who will operate the business? _____

2- Do you plan to employ any other individuals? _____

3- Do you plan to make any alterations or additions to your property to accommodate this business?

4- Will this occupation disrupt the peace and quiet, or radio and television reception? Describe any unusual lighting, sound, noise, or vibration associated with the request.

5- Where will the business be conducted? (Specify rooms and square footage involved)

6. Will you maintain inventory supplies? Where will these items be stored?

7. Do you plan to display goods, wares, or merchandise in your home? Where?

8. Will you have an advertising sign displayed on premises?

9. Please describe traffic which will be generated as a result of this request?

10. Do you anticipate a need for off-street parking? Where is parking area provided?

11. Are there any noises, dust, odors, or noxious fumes associated with your business? _____
Please list other hazards to health or safety:

12. What will your hours of operation be? _____

13. Do you plan to use flammables, explosives, or other dangerous materials, or to raise animals capable of inflicting harm to any person or property? _____

14. Will there be an increased demand for utility services or community facilities? _____

15. If applicable, have you obtained approvals from the Division of Professional Licensing, County Health Department, or Department of Human Services? _____

Application Fee

I. Please select each of the following, which pertain to your business.

		Total
1) Professional Services :(Doctors, Architects, Engineers, Dentists, Lawyers, Bankers, etc.)	\$ 50.00	
2) All Other Services	\$ 30.00	
3) Prepared Food Distribution	\$ 25.00	
4) Grocery Distribution	\$ 25.00	
5) Hardware - Software	\$ 25.00	
6) Oil and Fuel Products	\$ 25.00	
7) Towing Services	\$ 25.00	
8) Rental Equipment	\$ 25.00	
9) Prescription Drugs	\$ 25.00	
10) Gaming Machines - Vending Machines	\$ 25.00	
11) Tanning Booths	\$ 25.00	
12) Sale of Alcoholic Beverages	\$200.00	
13) General Contractors	\$50.00	
14) Sub Contractors	\$30.00	
15) Units:(Motels, Hotels, Mobile Home Parks RV Parks, and Rental Units)		
	\$20 Base Fee + \$10 Per Unit	
16) Storage Units:	\$20 Base Fee + \$5 Per Unit	
17) Major Home Occupation	\$ 35.00	
18) Minor Home Occupation	\$ 25.00	
19) Any Other Business Not Described Herein	\$ 25.00	
II. Number of Employees (Owner/ Manger Exempt)		
Average number of employees at place of business each regular working day		
1 to 3	\$25.00	
4 to 20	\$40.00	
21 to 50	\$60.00	
50 and over	\$80.00	
III. Special licenses		
Auction License - Each Time	\$50.00	
Total for Items I, II, and III		

If the application is denied or withdrawn, the license fees deposited with this application less a \$10.00 processing fee shall be refunded.

I am aware this application does not authorize conducting business until approved by the Coalville City Council and a business license has been issued. Issuance of the business license shall not relieve applicant of the responsibility to comply with applicable zoning, health, building, or fire regulations.

I am also aware that the license is due and payable on the day of application and thereafter January 1st of each year. It will be considered past due after January 1st of each year and a penalty of a double fee imposed after March 1st of each year. The business license will be revoked and the business closed if not paid by April 1st of each year.

It is understood that if Coalville City should be compelled to commence or sustain action at law to collect said

license fees or any part thereof, or close said business, the applicant or owner of said business shall pay all costs in connection therewith, including reasonable attorney's fees.

I/We, _____ hereby certify the information provided is correct and agrees to release information regarding this application and further agree to conduct said business strictly in accordance with the Laws and Ordinances covering such business.

Date _____ Position _____ Signature _____

****OFFICE USE ONLY** :**

Application Accepted by _____

Treasurer Date

Approved/Denied _____

Community Development Director Date

Minor Home Occupation or Major Home Occupation

If Major Home Occupation list conditional use approval Date: _____

Conditions of Approval:

