

**River Heights City
Business License Application**

Application for: () New Business () License Renewal

Type of Business: () Home Occupation () Business Occupation (outside of home)

Fire Inspection Needed: () No () Yes. If yes, attach inspection form.

A Certificate of Occupancy will be required, if applicable.

OWNER INFORMATION:

Name _____ E-mail _____
Address _____ Cell # _____
Phone _____

BUSINESS INFORMATION:

Name _____
Mailing Address _____
No. of Employees _____

Sales tax ID # _____ Federal ID ()SSN or ()EIN _____
Professional License/State Contractors # (if applicable) _____

Please describe your business: _____

I/We hereby agree to conduct said business strictly in accordance with the business regulations as set forth in the River Heights City Ordinances, and swear under penalty of law the information contained herein is true.

Signature of Owner/Authorized Agent **Date**

This business: () is permitted, () requires a Conditional Use Permit, () is not permitted.

Fee \$ _____ Date Paid _____ Receipt # _____
Late fee \$ _____ Date Issued _____ License _____

Approved by:

Sheila Lind, Recorder