

Application Form Home Occupation License

| Date: | | |
|-------|------|--|
| Paid: | | |

374 East Main, Vernal, Utah 84078 www.vernalcity.org

Phone 435-789-2255 FAX 435-789-2256

THIS IS <u>ONLY AN APPLICATION</u>. THE LICENSE WILL NOT BE ISSUED UNTIL REVIEWS ARE COMPLETE. BOTH SIDES OF THE APPLICATION MUST BE COMPLETED FULLY, INCLUDING ALL SIGNATURES.

| BUSINESS INFORMATION | | | | | |
|---|------------------------------|---------------|-----------------------------------|-------|--|
| □ Corporation | □ Proprietorship | | □ Partnership | □ LLC | |
| Business Name: | iness Name: | | Phone: | | |
| Doing Business As (DBA): | | | | | |
| Physical Address: | | | | | |
| Mailing Address: | | | Address Change: | | |
| Email: | mail: Website | | :: :: | | |
| Utah State Sales Tax Number: | | • | | | |
| Business Description: | | | | | |
| APPLICANT | | | | | |
| Name: | | Phone: | | | |
| Address: | ddress: Email: | | | | |
| EMERGENCY CONTACT | | | | | |
| Name: | e: Phone: | | | | |
| Address: | | | | | |
| PROPERTY OWNER (if location | is leased) | | | | |
| Name: Phone: | | | | | |
| ***** Perr | nission for Property Use | (please a | ttach letter)****** | | |
| ADDITIONAL INFORMATION | | | | | |
| Will your business require a State/ | Federal License? If so, (ple | ease list typ | e of license and license number): | | |
| Will your home occupation have employees? If yes, explain: | | | | | |
| Will your home occupation have customers coming to the house? If yes, explain: | | | | | |
| Will your business have vehicles used for the home occupation? If yes, where will they be parked? | | | | | |
| Is there anything with the business that would disturb the neighborhood by reason of color, design, materials, construction, lighting, sounds, noises or vibrations? If yes, explain: | | | | | |

APPLICANT:

- 1) **Mandatory review process** This application DOES NOT constitute a business license. All applications are subject to the review process mandated by Title 5 of Vernal Municipal Code. Incomplete applications will not be processed. Decisions on applications are made based on:
- (i) the information provided on the application materials, and
- (ii) reviews and inspections performed, as required.
- 2) **Additional Requirements** Under Vernal Municipal Code, additional business license application requirements are necessitated for some business types.
- 3) **Denial of License** Application denial or subsequent license suspension or revocation is most often the result of:
- (i) an inaccurate or incomplete application, or failure to update information with the City, and/or
- (ii) non-compliance with Vernal Municipal Code, Land Use Code, and/or applicable building, fire, and environmental codes.
- 4) **Other regulatory bodies -** It is the responsibility of the applicant to determine and comply with any requirements from other regulatory agencies.
- 5) **Signage** Permanent signage requires a separate Building Permit application, which is administered by the Planning and Development Department (435-789-2271).
- 6) **Building alterations** All alterations to buildings or spaces, including electrical, plumbing, and mechanical alterations, require a separate building permit and inspections as established by State of Utah and Vernal City Code. Building permits are administered by the Planning and Development Department (435-789-2271).
- 7) **Occupying buildings** It is the RESPONSIBILITY OF THE APPLICANT to ensure that all Building requirements are met before using any structure to conduct business. A Business License is not a Certificate of Occupancy and the possession of a Business License DOES NOT itself authorize a building to be occupied or used.
- 8) I understand and will adhere by <u>Vernal City Home Occupation ordinance-Section 16.22.030</u>. I understand that the ordinance may change and therefore it will be my responsibility to maintain compliance.
- 9) Please note that it is a class B misdemeanor to operate a business within Vernal City without a license.

I affirm that:

Signature:

- (i) I am an authorized agent of the business for which application is being made, and
- $(ii) \ the \ information \ on \ this \ form \ and \ on \ all \ application \ materials \ is \ both \ complete \ and \ accurate \ to \ the \ best \ of \ my \ knowledge.$

Date:

| ADMINISTRATIVE ACTION (for office use only) | | | | | | |
|---|-------------|------------------|--------|-------------|-------|--|
| Fees: | | | | | | |
| □ Base | □ Pro-Rated | □ Address Change | □ Fine | □ FTE x \$3 | TOTAL | |

| □ Base □ Pro-Rated □ Address Char | nge | |
|-----------------------------------|-------------------|--|
| Date Received: | Land Use Zone: | |
| License Number: | Parcel Number(s): | |
| PLANNING DEPARTMENT: | PROVED DENIED | |
| Signature: | Date: | |
| BUSINESS LICENSE CLERK: | PROVED DENIED | |
| Signature: | Date: | |



Assessor's Form

Congratulations on the establishment of your new business. To smooth your business path, please be aware of the following statutory provisions relating to businesses:

- Utah Code, annotated 59-2-101 et seq., requires that each business pay property tax on the equipment and fixtures used in its operation.
- To assist the Assessor in determining what taxable equipment you have, Utah Code requires you to file an affidavit each year with the Assessor's Office.
- Business names are also picked up through phone listings and state and local government agencies. Property that has escaped taxation can be picked up and back billed to you with interest and penalties.
- The responsibility for business taxes is a personal obligation of the business owner.

Please fill out the applicable fields below (pick one of the three groups).

Existing Business:

Business Start Date (date began operating):

Name of Business:

Owner's Name:

Address of Personal Property:

Mailing Address:

Telephone Number:

New Business:

Business Start Date (estimated Commission approval date):

Name of Business:

Owner's Name:

Address of Personal Property:

Mailing Address:

Telephone Number:

Business Name Change/New Owner:

Prior Name of Business:

New Name of Business:

Owner's Name:

Address of Personal Property:

Mailing Address:

Telephone Number:

Type of Business:

What Type of Equipment Do You Have? (computers, machinery, furniture, file cabinets, manufacturing equipment, and estimate cost of office supplies)