355 FOURTH STREET
BENNETT, COLORADO
80102-7806
(303) 644-3249
(303) 644-4125 - FAX

TOWN OF BENNETT – BUSINESS LICENSE APPLICATION

Town Use Only	
	License Number:
	Business Name:
	License Fee: Payable to the Town of Bennett ○ $10.00 Home Based Business ○ $25.00 Non-home Based Business

Business Information		
	Trade (DBA) Name of Business	☐ Sales Tax ID:
	Legal Name of Business	
	Business Location Address (Cannot Accept PO Box) Street Unit# City State Zip	
	Mailing Address (If different than location)	
	Business Email Address	Business Website Address
	Business Location Phone#	Alternate Phone # ☐ Home ☐ Cell ☐ Corporate
	Business Located In: ☐ Commercial or Retail Building	☐ Private Residence
	Date Business Started or Will Start **in Bennett (MM/DD/YY)**	
	Type of Business: ☐ Retail ☐ Service ☐ Wholesale ☐ Leasing ☐ Mfg/Processing ☐ Other	
	Describe The Nature of Business: Please Be Specific	
	Will the business display, sell or rent any merchandise or items which could be characterized as sexually oriented, including but not limited to sex toys/appliances, novelties, products or packaging which displays nudity or erotic or so called X-Rated videos/DVD's? ☐ YES ☐ NO	
	Where are the Accounting Books and Records kept for this Business (If different from Business Location)	
	Business Name Contact Person Phone Number	
	Street Unit# City State Zip	

Hours of Operation	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	From ○ am ○ pm	From ○ ○	From ○ ○	From ○ ○	From ○ ○	From ○ ○	From ○ ○
	To ○ ○	To ○ ○	To ○ ○	To ○ ○	To ○ ○	To ○ ○	To ○ ○

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Contact Information						
	Owner			Phone		
	Home Address					
	Street	Unit#	City		State	Zip
	Manager			Phone		
	Street	Unit#	City		State	Zip

In Case of Emergency, Please Contact		
Name	Address	After Hours Phone
Alarm Company	Phone	
Please Indicate the action you wish the Sheriffs Office to follow, if an open door is found at your business location ○ Enter the building ○ Call the emergency contact first		

Other Licenses			
	If you currently hold other Town of Bennett Licenses, please complete the following:		
	Type of License	License Number	Is this license to be closed upon issuance of the new license? □ YES □ NO
	Are the businesses owned by exactly the same legal entity? □ YES □ NO (If no, please list owner information)		
	Owner	Address	Phone

Signature			
	It shall be unlawful for any applicant to knowingly provide any materially inaccurate, false, or misleading information on any license application. I hereby certify under penalty of perjury that the statements made herein are to the best of my knowledge true, correct, and complete. I hereby certify that I have completed and submitted the mandatory affidavit and required documentation.		
	Applicants Signature	Printed Name	Date

This Section for Town of Bennett Use Only				
	Town Clerk			
	□ Approved	□ Denied	Date	Comments
	Building Department			
	□ Approved	□ Denied	Date	Comments
	Town Treasurer			**Date**
	Accounting Department			**Date**
	Public Works Department			**Date**
	Utility Department			**Date**
	Website □ Add □ Remove			**Date**