

CITY OF DEMING
Business Registration Application

New Application _____ Renewal _____ Date _____

1. Name of Business _____

2. A. New Mexico Revenue Division Identification (CRS) #: _____

and either:

B. Current Federal Tax ID #: _____ Social Security #: _____

3. Location of Business: _____

4. A. Number of Employees: _____

B. Is the Business run from your home? _____

C. Will the number of employees impact traffic and/or parking in the neighborhood? _____

5. Number of locations within the Municipality: _____

6. Nature or type of business: _____

7. Length of intended stay in Deming: _____
(i.e. contract length, permanent business, etc.)

8. Applicant is a (circle one): Corporation Partnership Sole-Proprietorship

9. Please submit your fee with the application. Make checks payable to: City of Deming. The business Registration Fee cannot be prorated for a partial year. Therefore this application should be renewed in January of every New Year.

Print Name: _____

Title _____ Phone #: _____

Mailing Address _____

Signature _____

FOR OFFICE USE ONLY

Fee: _____ Date: _____

Acct #: _____

Receipt #: _____

License #: _____

Approved: _____

Disapproved: _____

By: _____

Date: _____

Business licensed under section 5-1-3 of the Municipal Code shall pay the appropriate fee.