

TOWN OF SILVER PLUME
710 Main Street
PO Drawer F
Silver Plume, Colorado 80476

BUSINESS LICENSE APPLICATION

THIS APPLICATION IS FOR A: _____ new license _____ renewal

NAME OF BUSINESS OWNER: _____

NAME OF BUSINESS (DBA) _____

STREET ADDRESS OF BUSINESS _____

MAILING ADDRESS (if different) _____

BUSINESS PHONE NUMBER _____

EMAIL ADDRESS: _____

EMERGENCY PHONE NUMBER _____

LOCAL MANAGER CONTACT
(if not Owner) _____

NUMBER OF EMPLOYEES _____

DESCRIPTION OF BUSINESS _____

TYPE OF BUSINESS ENTITY
Sole proprietorship, LLC, etc. _____

WEBSITE ADDRESS _____

STATE SALES TAX NUMBER
(if applicable) _____

I affirm that the information contained in this Application is true and accurate.

Signature of Applicant

Date

PLEASE RETURN THIS FORM WITH PAYMENT (please make checks payable to the Town of Silver Plume)

ANNUAL BUSINESS LICENSE FEE for 2022: \$50.00

THIS SECTION TO BE COMPLETED BY THE TOWN:

Date Application and Fee Received: _____

Approved: _____ Denied: _____

License Number: _____

Date Issued: _____

By: _____
Signature/ Licensing Officer