

Commercial **Business License Application**

125 S Main Street Vineyard, UT 84059 801-226-1929

BUSINESS INFORMATIO	N	www.vineyardutah.org				
Business Status (check all that apply): ☐ New	Business Location (Change □ Name Change □ Ownership Change				
Business Name:						
Business Address:						
City:	State: ZIP Code:	Local Business Phone:				
Mailing Address:						
City:	State: ZIP Code:	Corporate Business Phone:				
Business Email:		Business Website:				
BUSINESS DESCRIPTION						
Nature of Business: ☐ Manufacturing ☐ Retail ☐ Services ☐ Food Service (include copy of Utah County Health Permit) ☐ Wholesale ☐ Mobile Vendor ☐ Other:						
Describe your business and how the property will be used. Please be specific.						
☐ E-liquid Manufacturing, To Will your business produce, stor	, you will need a Vineyard you will need a Vineyard S If yes, see the Food Truck bacco, ENDS, E-cigarette a					
□Yes □No Number of employees at the location: (if you are the owner, do not count yourself.)						
1 7	ening? Yes No If yes	s, please list the estimated date of the event:				
the city. Do you intend to control If yes, do you already have a cor	act for towing/parking ent ntract with a towing comp	or parking enforcement company that you contract with must be certified by forcement services? No lifyes, please attach name and contact information to this is a Towing/Parking Enforcement Certificate.				
OWNER AND MANAGER	INFORMATION					
Business Owner:						
Phone:		Email:				
Business Manager:						
Phone:		Email:				

FEDERAL AND STATE INFORMATION

State numbers can be obtained by loggi application will notify you if you need to https://www.irs.gov/businesses/small-b proprietor will need an EIN. All employed no employees, write N/A.	obtain a federal Er usinesses-self-emp	mployer Identification Numbe loyed/employer-id-numbers-	er (EIN). To eins. All er	apply for an EIN, go to ntities other than an individual/sole			
State Registration: Corporation	Registration: Corporation Partnership Limited Liability (LLC) Sole Proprietor DBA						
State Sales Tax #:				EIN:			
State Business Registration/Entity Numb	per:						
State License/DOPL Type (if any):	Number:			Expires:			
Federal License Type (if any):	Number:			Expires:			
LICENSE AND FEE INFORMATI	ION						
License Period is January 1st through December 31st. License renewals are due December 31st. Complete applications received after July 1st will be charged half the annual fee.							
TYPE OF BUSINESS			ANNUAL LICENSE FEE				
Industrial, Manufacturing, & Distribution			\$250				
Restaurant/Food Related			\$190				
Retail			\$215				
Service Related			\$75				
Mobile Food Business			\$25 per food truck				
ltinerant Merchant (90-day		\$30					
Solicitor (submit Solicitor's License Application)			\$30				
ADDITIONAL REQUIREMENTS In addition to this Application, please	e submit the follo Survey ary federal, state	or county permit or licens		on how to schedule the			
By signing below, I certify that the inf commence at this location without fi Utah County Health Officials, which r activities.	rst obtaining a bu	usiness license, and if need	ded, inspe	ections by the fire inspector and			
Signature of Business Owner	 Pr	inted Name of Business Own	ner	 Date			