

Kane County

76 N. Main - Kanab, UT 84741 (435) 644-2458

BUSINESS LICENSE APPLICATION

(PLEASE COMPLETE ALL INFORMATION OR YOUR APPLICATION WILL BE DENIED)



BUSINESS INFORMATION

Business Name: _____

Business Rental Name: _____

Business Physical Address: _____

City: _____ State: _____ Zip: _____

Property ACCOUNT # _____ Property PARCEL # _____

Business Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone #: _____ (must have)

Business Website: _____ Email Address: _____

Type of Organization:

- Self-owned/Sole Proprietor
- Partnership
- Corporation/LLC
- Limited Partnership
- Home Occupation

Status of Business:

- New
- New Location
- New Owner
- Change of Use

Vacation Rental Listing:

- Airbnb (attach account#)
- VRBO
- Flipkey
- Homeaway (attach account#)
- Other _____

Sales Tax (STC #) _____ DBA # _____

Federal Tax ID # _____ Contractors Lic. # _____

Vacation Rental (STR #) _____ Airbnb account # _____

(MAKE SURE THE STATE TAX COMMISSION LISTS YOUR PROPERTY IN THE COUNTY, NOT THE CITY)

Detailed Description of Business (What it involves: Traffic, Parking, etc.) _____

CONTINUE ON 2ND PAGE

BUSINESS NAME: _____

Owner / Applicant Information

Owners Name: _____ D.O.B. _____
Mailing Address: _____ Home Phone # _____
City: _____ State / Zip: _____ Last 4 of SS# _____
Alternate Contact: _____ Phone #: _____

For partnership or corporation, please list same information as above for all partners, principal officers, and directors.

Owner / Applicant Information

Owners Name: _____ D.O.B. _____
Mailing Address: _____ Home Phone # _____
City: _____ State / Zip: _____ Last 4 of SS# _____
Alternate Contact: _____ Phone #: _____

For partnership or corporation, please list same information as above for all partners, principal officers, and directors on a separate sheet and attach.

Owner / Applicant Information

Owners Name: _____ D.O.B. _____
Mailing Address: _____ Home Phone # _____
City: _____ State / Zip: _____ Last 4 of SS# _____
Alternate Contact: _____ Phone #: _____

For partnership or corporation, please list same information as above for all partners, principal officers, and directors on a separate sheet and attach.

I (we) hereby agree to conduct business in accordance with the laws and ordinances governing such business and swear under penalty of law, the information contained herein is true.

_____ *Date* _____ *Position* _____ *Please Print Name*

_____ *Authorized Signature*

Check Appropriate Box	
Business License Fees	
<input type="checkbox"/> Business License	\$65.00
<input type="checkbox"/> Temporary	\$25.00
<input type="checkbox"/> Late Fee	\$50.00

Total Enclosed \$ _____

Receipt # _____

License will be valid until December 31st

BUSINESS NAME: _____

FOR OFFICE USE ONLY

Zoning Administrator Signature

Parcel #

Zone

Date: _____

Approved: ___ Not Approved: ___

Comments: _____

Building Inspector Signature: _____

Date: _____

Approved: ___

Not Approved: _____

Comments: _____

Clerk/Auditor Signature: _____

Date: _____

Approved: ___

Not Approved: _____

Comments: _____
