



# KAMAS CITY BUSINESS LICENSE APPLICATION

170 N. MAIN  
KAMAS, UT 84036  
PH (435) 783-4630  
F (435) 783-6209

BUSINESS NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ ZONING \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

APPLICANT NAME \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ FAX \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

TAX ID # \_\_\_\_\_ AND/OR SS# \_\_\_\_\_

BUSINESS DESCRIPTION \_\_\_\_\_

### OFFICE USE ONLY:

Fees Paid: \$

Home Occupation	\$25.00	Alcohol	\$200.00
Business	\$50.00	Bank	\$200.00
Rental Property	\$50.00, plus \$10 per unit	Fireworks	\$200.00

Police Dept. \_\_\_\_\_ Background \_\_\_\_\_

Planning \_\_\_\_\_ Building Official \_\_\_\_\_

State Certificate \_\_\_\_\_ Health Department \_\_\_\_\_

License Number \_\_\_\_\_

Conditions: \_\_\_\_\_

Comments: \_\_\_\_\_

Licensing Official \_\_\_\_\_ Date \_\_\_\_\_