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# TOWN OF LEVAN

## Levan, Utah

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### Application for Business License

I, the undersigned, hereby apply for a license to do business within the municipality of Levan, Utah.

1. Name of person desiring license: \_\_\_\_\_
2. Phone number: \_\_\_\_\_ Email: \_\_\_\_\_
3. Kind of license desired (state the business, calling, trade or profession to be performed): \_\_\_\_\_
4. Name of Business: \_\_\_\_\_
5. Place of Business (address): \_\_\_\_\_
6. Mailing Address: \_\_\_\_\_
7. Business Manager: \_\_\_\_\_
8. Class of license if applicable: \_\_\_\_\_
9. If business is selling food or beverage, has a permit been obtained from the Department of Health? (Please attach): \_\_\_\_\_
10. Sales Tax Number: \_\_\_\_\_
11. Copy of State License & Number (if applicable): \_\_\_\_\_

I, the undersigned, hereby agree to be bound by the rules, regulations, resolutions or ordinances enacted or adopted by the governing body applicable to the Town's regulation of business.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature of Applicant