



Fairfield School House, 1898

FAIRFIELD

Established 1855 - Incorporated 2004

Business License Application

PO BOX 271
Cedar Fort, UT 84013

Business Status (check all that apply): New Business Location Change
 Name Change Ownership Change DBA Sole-Proprietor Limited Liability
 Corporation Non-Profit Partnership

Application Date: _____

Tentative Opening Date: _____

Business Name: _____

DBA Name: _____

Has this name been registered with the State of Utah, Commerce Department? Yes No
Registration #: _____

Sales Tax #: _____ **EIN/Fed Tax #** _____

Utah County Assessor - Personal Property form completed: Yes No
Utah County Assessor #: _____

If Name and/or Address Change, List Previous Business Name/Address:

Business Location: Physical Address: _____

City,State,Zip: _____

Primary Business Phone: _____ Alternate Phone: _____

Email: _____

Hours of Operation: _____ Days of the Week: S M T W R F S

Zone: _____ **Parcel Number:** _____

Contact/Mailing Information: (if different from business address)

Address: _____

City,State,Zip: _____

Contact Name: _____ Phone: _____

Contact Email Address: _____

Have you previously operated a business in Fairfield Town? Yes No

If Yes, business name: _____ Year(s) _____

Address: _____

Type of Business: General (Commercial) Home Based* Services Dining
 Health & Medical Shopping Education Temporary/Seasonal* Solicitor's license
 Other: _____

Description of Business: _____

Describe any outside storage: _____

Details of Business:

1. Number of employees: _____
2. Gross Floor Area: _____ square feet (Please provide a floor plan if exceeds 1,000 sq ft)
3. Is this a newly constructed building or individual tenant improvement? Yes* No
4. If No, what was the prior use of the building/space? _____
If New construction, Building Permit number: _____
5. Are there additional businesses within the building? Yes No
6. Will there be any changes/additions to existing signage? Yes No
7. Will there be any changes/additions to the building site? Yes* No
*If Yes, Please explain: _____

All proposed signage (permanent or temporary) shall meet the Fairfield Town Code 10.21. All commercial spaces that have been remodeled of any type are subject to a preoccupation inspection by the Building Department.

Public Safety Information

Emergency Information

In the event of a police or fire emergency, the information you provide helps us contact you. Ideally, the first contact person should respond to the business in a short amount of time and have the necessary keys or alarm codes to enter the building.

1st Contact: Name: _____ Position: Owner Manager Employee
Address: _____ City, State, Zip: _____
Day-time phone: _____ Evening Phone: _____

2nd Contact: Name: _____ Position: Owner Manager Employee
Address: _____ City, State, Zip: _____
Day-time phone: _____ Evening Phone: _____

Is there a security alarm system: Yes No If yes, please list the alarm company's name and phone number:
Name: _____ **Number:** _____

If different from contact person #1 or #2 as listed above, who is the responsible party?
Name: _____ **Number:** _____

Is this building equipped with a fire sprinkler system? Yes No
Is this building equipped with a Fire Alarm system? Yes No

Applicant's Agreement

These forms, including any supplemental applications, are for a business license. The actual license will be issued only when the business complies with all local, state, and federal building codes. All inspections are completed and approved by the necessary Town departments.

It is unlawful for any person to engage in business within the Town without first obtaining a license. (Town Code 3.1.20)

Business licenses shall not be transferred from one person to another. (Town Code 3.1.40(F))

I, the undersigned, hereby agree to conduct said business strictly in accordance with all Fairfield Town codes governing such business and swear under penalty of law that the information contained herein is complete, truthful, and accurate to the best of my knowledge and current belief. I understand that to falsify any information on this application is grounds for denial and or revocation of this license, which shall be valid for a period from July 1st to June 30th. I must be renewed on an annual basis to remain valid. Suppose the renewal fee, plus any disproportionate fee due, is not paid within 45 days after expiration. In that case, a penalty fee of 25% of the total amount due shall be imposed and shall become part of the license fee.

*If the home-based business, I have read and understood the home-based business code. (Town Code Title 3.5)

Applicant signature: _____ **Date:** _____

Please Print Your Name: _____

Acknowledgment of Public Information

I, the undersigned, do hereby acknowledge that the information contained in this application is public information.

Signature of Authorized Business Agent/Owner:

_____ **Date:** _____

Office Use Only:

Building Department: _____ **Approved** _____ **Denied** _____ **Date**

Fire Department: _____ **Approved** _____ **Denied** _____ **Date**

Site Plan Required? ___ **Yes** ___ **No**

Health Department Approval? ___ **Yes** ___ **No**

Land Use Zone: _____ **Conditional Use Permit Required?** ___ **Yes** ___ **No**

Planning & Zoning: _____ **Approved** _____ **Denied** _____ **Date**

Town Council: _____ **Approved** _____ **Denied** _____ **Date**

Reason/Comments:

Business license fee: _____ **Fire Inspection Fee:** _____

Total: _____

Check Amount: _____ **Check #:** _____ **Receipt #:** _____

License Number: _____

Fairfield Town Recorder, Stephanie Shelley

Date