



New Business and Regulatory License Application

Ephraim City (435)283-4631

5 S. Main, Ephraim UT 84627

This form is an application for a business license. The receipt for payment of license fees thereof does not constitute being approved to operate a business. The actual license will be issued only when all inspections are completed and signed off by the various City departments and approval is given by the Business License Office. Incomplete applications will not be accepted. All Federal and State numbers must be obtained before application will be accepted. All business licenses (with the exception of temporary businesses) expire December 31st each year. Ephraim City shall not be held responsible for delays in processing an incomplete application, or for property improvements, and other business expenditures occurring before the license applicant receives final approval. To open and/or operate a business without final approval is a Class "B" misdemeanor and is subject to a fine and/or six-month sentence.

BUSINESS INFORMATION (Public):

Business Name:		Business Phone:	
DBA:		Business Email:	
Business Address:		City:	State:
Mailing Address:		City:	State:
Zip:			
**State numbers can be obtained by logging into https://secure.utah.gov/account/log-in.html (One Stop Business Registration) **			
LLC <input type="checkbox"/>	Corporation <input type="checkbox"/>	Sole Proprietorship <input type="checkbox"/>	Non-Profit <input type="checkbox"/>
Other (Explain) <input type="checkbox"/>			
Sales Tax #:	EIN or SS #:	Entity #:	DOPL #:
Business Description:			
Business Hours:		Number of Employees:	Opening Date:

FOOD ESTABLISHMENT AND BEER SALES:

<p>If you are a food establishment, we require the following:</p> <ul style="list-style-type: none"> • Health Department Permit/Inspection • Food Handler's Permit for all employees • Food Safety Manager Certificate • Fire Inspection 	<p>If you are selling beer, we require the following:</p> <ul style="list-style-type: none"> • Health Department Permit/Inspection • Performance Bond in the amount of 1000.00 • Alcohol Training and Education for all employees serving/selling alcohol.
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OWNER INFORMATION (Confidential):

Owner Name:	Phone:		
Mailing Address:	City:	State:	Zip:
Email Address:	Birth Date:		
Driver's License Number:	State Issued:		

LOCAL BUSINESS MANAGER INFORMATION:

Manager Name:	Business Phone:
Email Address:	Personal Phone (City use only):

BUSINESS LICENSE FEES:

Yearly	1 st & 2 nd Quarter	Pro-rated fee 3 rd Quarter	Pro-rated fee 4 th Quarter
Commercial /Industrial *	\$50.00	\$45.00	\$40.00
Apartments, Commercial Rentals & Home Rentals – 3 or more units	\$50.00	\$45.00	\$40.00
Home Rentals—2 or less units	\$25.00	\$20.00	\$15.00
Commercial Beer License *	\$50.00 + \$1,000 Bond	No pro-rated fee	No pro-rated fee
Home Based Business - Exempt	No Charge		
Home Based Business – Not Exempt*	\$25.00	\$20.00	\$15.00
Business License Processing Fee	\$10.00		

All Businesses are subject to Fire Safety Inspection Fees in addition to Business License Fees.

A Late fee of ½ the amount due is added to the Business License fee after January 15 of each year.

* Conditional Use Permit Fees may apply in some zones.

Temporary	3 – 6 Months	Less than 3 Months
Seasonal Vendor	\$25.00	\$10.00 per month
Transient Vendor (Door-to-door Background Check)		\$50.00 a day (Requires Utah State BCI check for each employee)
Temporary/Special Events 1-3 Days (Craft Fairs, Festivals, Fireworks Stands, etc.)		\$20.00 (1-3 days) (Requires registration with State Special Events)

I hereby agree to conduct said business in accordance with all Ephraim City codes governing such business, and swear under penalty of law that the information contained herein is true and correct. I also understand that to falsify any information on this application is grounds for denial and/or revocation of this license and other penalties as provided by law.

Applicant's Name _____ Date: ___/___/___

Applicant's Signature _____

FOR OFFICE USE ONLY

Application Received By _____ Date ___/___/___ Amount Paid _____

Zone:	Permitted:	Conditional Use Permit Required:	Fire Inspection Required:
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Zoning Official Approval: _____ Date ___/___/___

Comments/Conditions of Approval:

License Number _____ Issued By _____ Date ___/___/___