

Town of Eaton Business License Application

223 1st St

Eaton, CO 80615

(970) 454-3338 Fax: (970) 454-3339

☒ **Renewal Application Fee: \$ 20.00**

Name of Business: _____

Owner's Name: _____

Local Business Address: _____

Business Mailing Address: _____

City/State/Zip: _____

Business Telephone: _____ **email:** _____

Web address: _____

Address of Owner: (if different than above) _____

City/State/Zip: _____

Telephone: _____ **email:** _____

Name of Manager: (if different than owner): _____

Address, City, State, Zip: _____

Telephone: _____ **email:** _____

Nature of Business: _____

(specify items sold and/or services provided)

Home Occupation: Yes___ No___ (If yes, fill out Home Occupation Certificate Form)

Number of Employees: Full Time___ **Part Time:**___ **Seasonal:**___

Contact Person in Case of Emergency:

Name

Address

Phone

The undersigned certifies that the foregoing information is true and that all of the business conducted by such business is legally allowed under local (Town of Eaton), State (Colorado), and federal (United States) law. The undersigned further understands that should any of the information in this application later be deemed false, such business license can be immediately revoked by the Town.

Applicant's Signature (Required): _____ **Date:** _____

FOR CLERK'S OFFICE USE ONLY

LICENSE NO: _____

Amount Paid: _____ Date Paid: _____

CC/DC Cash Check Receipt # _____

Clerk Review/Approval/Date: _____