



# TOWN OF LA VETA, COLORADO

**111 West Moore Avenue, P. O. Box 174, La Veta, CO 81055-0174**  
**Phone: (719) 742-3631 \* Fax: (719) 742-5420**

## **BUSINESS LICENSE APPLICATION**

**Please Print**

1. Trade Name (DBA): \_\_\_\_\_
2. Location of Business: \_\_\_\_\_  
Street Address
3. Mailing Address: \_\_\_\_\_
4. Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ E-mail address: \_\_\_\_\_
5. Owner Name: \_\_\_\_\_
6. Owner Address: \_\_\_\_\_
7. State Sales Tax ID#: \_\_\_\_\_
8. What is the main operation of the business? \_\_\_\_\_
9. Is this a home based business?  Yes  No
10. Type of Business:  Retail  Manufacturing  Service  Wholesale Trade  
 Other (please describe) \_\_\_\_\_
11. What is the Zoning for this Business location? \_\_\_\_\_
12. Number of Employees: \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time

Attach a copy of State Sales Tax License and, if applicable, a Public Health Inspection for kitchen.

I declare, under the penalty of perjury, that this application has been examined by me; that the statements made herein are made in good faith pursuant to applicable tax laws and regulations, and to the best of my knowledge and belief, are true, correct, and complete.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

The Town of La Veta Business License Fee is \$25.00 per year. Make check payable to the "Town of La Veta". This is an annual fee payable and due at the beginning of each year and must be renewed no later than January 15. License expires on December 31 of each year.

Please mail completed application to:

Town of La Veta  
P. O. Box 174  
or deliver to  
111 W. Moore Avenue  
La Veta, CO 81055-0174

**For Office Use Only**

License #: \_\_\_\_\_  
Date Issued: \_\_\_\_\_