



MARRIOTT-SLATERVILLE CITY  
 BUSINESS LICENSE APPLICATION  
 1570 WEST 400 NORTH  
 MARRIOTT-SLATERVILLE CITY, UTAH 84404  
 (801) 627-1919 (801) 627-1880

DATE PAID: _____
RECEIPT NO. _____
CLASS: _____
AMOUNT: _____
REC. BY: _____

Application Date: \_\_\_\_\_ Email Address: \_\_\_\_\_

Federal Tax ID #: \_\_\_\_\_ State Sales Tax #: \_\_\_\_\_ State Contractor #: \_\_\_\_\_

Business Name: \_\_\_\_\_ LICENCE CLASS: \_\_\_\_\_

Business Address: \_\_\_\_\_ FEE SCHEDULE: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Temporary (30) days or less?

Business Phone: \_\_\_\_\_ Is this a Home Occupation?

Business Owner: \_\_\_\_\_ **Beer License:**

Address of Owner: \_\_\_\_\_ Must also complete separate application.

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Beer License Approval:  Yes  No

Home Phone: \_\_\_\_\_ **Home Businesses** may not be permitted to have visiting clientele.

Owner Date of Birth: \_\_\_\_\_

Owner Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ **Temporary Business** licenses are only valid for 31 days or less.

Property Owner: \_\_\_\_\_

Property Owner Address \_\_\_\_\_ **Sexually Oriented Businesses** must also comply with MSMC Chapter 5.82.

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Special Restrictions: \_\_\_\_\_ Office Use Only:

New Business  New Owner  New Location  Re-application

Number of Employees in Business: \_\_\_\_\_ Number of Units: \_\_\_\_\_ Date Commencing: \_\_\_\_\_

Building Square Footage: \_\_\_\_\_ Building Frontage: \_\_\_\_\_ Emergency Contact Name: \_\_\_\_\_

Organization type:  Corporation/LLC  Partnership  Proprietorship/DBA Emergency Contact Number: \_\_\_\_\_

Manager's Name: \_\_\_\_\_ Manager Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Description of Business: \_\_\_\_\_

This is an application for a business license. Actual license will issue only when zoning requirements have been met, and ALL inspections are completed and approved. Issuance does not guarantee compliance with zoning and other local ordinances. All information must be accurately completed or the issuance may be delayed and criminal penalties may apply. Issuance of a business license does not relieve applicant or property owner from responsibility to comply with applicable regulations.

I/ We, \_\_\_\_\_, hereby agree to conduct business strictly in accordance with the Laws and Ordinances governing such business, and certify that the information provided in this application is true and correct.

**Signature of Authorized Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Office use only: \_\_\_\_\_ Planning: \_\_\_\_\_ Fire: \_\_\_\_\_ Building Insp: \_\_\_\_\_