



Date of Application \_\_\_\_\_

Business License Certificate Number \_\_\_\_\_

New   
Transfer

**65 NORTH 100 EAST, PLEASANT GROVE CITY, UTAH 84062**  
**PHONE: 801-785-6057 FAX: 801-785-8925**  
[ [www.pgcity.org](http://www.pgcity.org) ]

**◆ BUSINESS LICENSE APPLICATION ◆**

NOTICE: Please complete each statement below. Incomplete applications will not be accepted. **Applications must be completed within thirty (30) days.** Any application not completed within this time frame, will require repayment of fees and re-application of license.

**SECTION A — BUSINESS INFORMATION**

Name of Business: \_\_\_\_\_ Business Phone: \_\_\_\_\_

FAX Number: \_\_\_\_\_

Business Address: \_\_\_\_\_

(Street Number) (Suite/Unit) (City) (State) (Zip)

Business Mailing Address: \_\_\_\_\_

(Street Number) (Suite/Unit) (City) (State) (Zip)

State Sales Tax Number (if applicable): \_\_\_\_\_ Proposed Start Date: \_\_\_\_\_

State Registration Number / DBA / FEIN (if applicable): \_\_\_\_\_ Bond Required: \_\_\_\_\_

State License Number / DOPL (if applicable): \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

[Yes\_\_ No\_\_ May we share your information with the Pleasant Grove/Lindon Chamber of Commerce? They could be of assistance in helping your business to develop and be involved in the community.]

Nature of Business: \_\_\_\_\_

Detailed Description of Commercial Business: \_\_\_\_\_

Will there be any building or remodeling: Yes No Gross Leasable (Area in Sq. Ft.): \_\_\_\_\_

Commercial License - Property Owner Written Approval (Rent/Lease/Own): Yes No

Non-Homebased Business Only – Pleasant Grove City Utility Account Number: \_\_\_\_\_

Does Your Business Have a Security Alarm System: Yes No Are you a Sexually Oriented Business: Yes No

**Will any of the following be a part of the business:**

- Fireworks Sales ..... Yes No N/A
- Beer/Liquor Sales ..... Yes No N/A
- Amusement Devices ..... Yes No N/A
- Door-to-Door Sales ..... Yes No N/A
- Motorized Vehicle ..... Yes No N/A
- Bill Posting/Handbills ..... Yes No N/A

**PART B — HOME OCCUPATION INFORMATION ONLY**

- Will customers visit the home ..... Yes No
- Will display or stock of merchandise be at home ..... Yes No
- Will employees be at the house ..... Yes No
- Any unusual traffic be created in neighborhood ..... Yes No
- Will parking on roadside be needed ..... Yes No
- Will flammable, toxic or poisonous materials be kept at the home ..... Yes No
- What portion of home is to be used for business (25% total structure area) \_\_\_\_\_

**PART C — BUSINESS OWNER INFORMATION**

Owner's Name: \_\_\_\_\_  
(If other than sole proprietor, give names of partners or corporate president and secretary)

Home Address: \_\_\_\_\_  
(Street Number) (City) (State) (Zip)

Home Phone: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_  
(State)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**➤ 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. To open and/or operate a business without final approval is a Class B Misdemeanor and punishable by law.**

**LIST TWO RESPONSIBLE / AVAILABLE EMERGENCY CONTACTS:**

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

I UNDERSTAND AND AGREE to comply with all regulations of Title 3 Business License Regulations. **I UNDERSTAND that business shall not commence at this location without first obtaining a business license**, and that inspections of the City Building, Zoning, Fire Officials, and the County Health Officials must first be completed and the building approved by these officials for business activities.

\_\_\_\_\_ Business Owner's Signature \_\_\_\_\_ Date

**BELOW THIS LINE FOR OFFICE USE ONLY**

**➤NOTE: INITIAL BUSINESS LICENSE FEE MUST BE PAID WITH CASH, MONEY ORDER, CASHIER CHECK, CREDIT OR OTHER CERTIFIED FUNDS. BUSINESS LICENSE RENEWALS SHALL BE DUE ANNUALLY ON OR BEFORE DECEMBER 31. RESPONSIBILITY OF RENEWAL IS THAT OF THE LICENSEE. FAILURE TO RECEIVE RENEWAL NOTICE DOES NOT EXCUSE THIS RESPONSIBILITY.** [Title 3, 3-1-6, Pleasant Grove Municipal Code]

Home Occupation	50.00	\$ _____
Home Occupation No Offsite Impact	0.00	\$ _____
Commercial/Industrial/Manufacturing	75.00	\$ _____
Residential Solicitation (per individual)	25.00	\$ _____
Transient, Itinerant Merchants, Itinerant Vendors (annual)	100.00	\$ _____
Temporary Street Vendor (one to seven days)	15.00	\$ _____
Auctions	100.00	\$ _____
<b>Seasonal Business Licenses:</b>		
Firework Sales (Per Location)	300.00	\$ _____
Motorized vehicle retail sales (ice cream vendors, etc., 120 days maximum) (\$150 for first six (6) vendors; \$25 for each additional vendor)	150.00	\$ _____
Christmas Tree Lots (permit fee), Farmers Markets, Booths, Stands, etc. (Per Location)	100.00	\$ _____
<b>Alcoholic Beverage License Fees:</b>		
Beer License: Insurance Bond _____ Council Approval _____		
*Retail Fee: Class A or B: \$200.00 Class C: \$300.00		\$ _____
Alcohol License: Insurance Bond _____ Council Approval _____		
*Retail Fee: Seasonal & Club License:	300.00	\$ _____
*Application fee (Non-refundable):	100.00	\$ _____
Bill Posting and Handbills	25.00	\$ _____
<b>Amusement Devices:</b>		
Yearly fee for any number or combination of pool/tables, pinball machines, electronic games, juke boxes, as well as any other amusement devices:	50.00	\$ _____
Change of location/transfer fee:	25.00	\$ _____

**TOTAL FEE** \$ \_\_\_\_\_

**DEPARTMENT APPROVAL:**

Health/Agriculture Dept. Approval \_\_\_\_\_ Fire Dept. Approval \_\_\_\_\_  
 Zoning Dept. Approval \_\_\_\_\_ Building Dept. \_\_\_\_\_  
 Public Safety Motorized Vehicle Inspection \_\_\_\_\_ Public Safety Approval \_\_\_\_\_  
 Planning Commission Approval Yes No Date: \_\_\_\_\_  
 City Council Approval: Yes No Date: \_\_\_\_\_

**RESTRICTIONS:** \_\_\_\_\_  
 \_\_\_\_\_  
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