

BUSINESS LICENSE APPLICATION

Send all completed and properly signed forms (including attachments as necessary) along with applicable licensing fees to: South Jordan City, Business Licensing, 1600 W. Towne Center Drive, South Jordan City, UT 84095
Telephone: 253-5203 Ext. 1215



***INCOMPLETE APPLICATIONS WILL BE RETURNED**

*** Please Allow 4-5 weeks for approval**

Section 1: Business Information		
Business Name/DBA:		Website:
Location of Business:		Apt/Suite No.
City:	State:	Zip Code:
Business Telephone:	Business Fax:	Email:
Have you been previously licensed for this business? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, under what name & jurisdiction?		
Section 2: Applicant Information		
Applicant:		
Address:		Apt/Suite No.
City:	State:	Zip Code:
Telephone:	Email:	
Section 3. Business Mailing Address. (This is the address where all license and renewal forms will be sent)		
<input type="checkbox"/> Same as Section 1	<input type="checkbox"/> Same as Section 2	<input type="checkbox"/> Send all correspondence to:
Type of Organization: <input type="checkbox"/> Corporation; <input type="checkbox"/> Partnership; <input type="checkbox"/> Sole Proprietorship		
State License # (if applicable):	License Type:	Expiration Date:
Utah Sales Tax #:	Federal Tax ID #:	
Section 4. Business Information		
Projected Opening Date for Business:		
Daily Hours of Operation: ____ a.m. to ____ p.m. S M T W Th F S		
Detailed Description of Business:		
Number of Full-Time Employees: _____		Number of Part-Time Employees: _____
Has this business been registered with the State of Utah Commerce Dept? <input type="checkbox"/> Yes <input type="checkbox"/> No		
EPA Hazardous materials on site? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, MSDS of chemicals must be attached.		

Section 5: Reason for Application

- | | |
|---|--|
| <input type="checkbox"/> Business License Renewal | <input type="checkbox"/> Transfer of Business Location |
| <input type="checkbox"/> New Business License | <input type="checkbox"/> New Business Name |
| <input type="checkbox"/> New Business Owner | |

**I AM AWARE THIS APPLICATION DOES NOT AUTHORIZE CONDUCTING BUSINESS UNTIL APPROVED BY SOUTH JORDAN CITY AND LICENSE HAS BEEN ISSUED. ALL FEES ARE NON REFUNDABLE.
RENEWAL OF THIS LICENSE IS THE RESPONSIBILITY OF THE BUSINESS OWNER. FAILURE TO RECEIVE A RENEWAL NOTICE DOES NOT EXCUSE THIS RESPONSIBILITY.**

I HAVE READ THE FOLLOWING AND AGREE TO COMPLY WITH ALL ORDINANCES, CODES AND REGULATIONS SET FORTH BY SOUTH JORDAN CITY, SALT LAKE COUNTY, THE STATE OF UTAH, AND FEDERAL STANDARDS, WHICH EVER APPLIES. I ATTEST THAT ALL INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT. I ATTEST THAT ALL INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT.

IF THIS APPLICATION IS SIGNED IN BEHALF OF A COPORATION, THE SIGNATURE ALSO CERTIFIES THAT HE/SHE IS AUTHORIZED TO ACT ON ITS BEHALF.

SIGNATURE _____ DATE _____

***OFFICIAL USE ONLY ***

Department Review	Date Reviewed	Recommendation	Initials	Explanation if not recommended for approval
Planning & Zoning Division		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A		
Building Division		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A		
Police		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A		
Fire		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A		
Public Works		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A		
Utilities		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A		
Code Compliance		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A		
South Valley Health		<input type="checkbox"/> Approve <input type="checkbox"/> Disapprove <input type="checkbox"/> N/A		

License Number: _____ Issued: _____ Zoning: _____