

TOWN OF SILT
PO Box 70, Silt CO 81652
Business License Application - 2019

FOR OFFICE USE ONLY: Date Received _____ License No. _____

New Fee: \$50.00 Renewal Fee: \$50.00 Renewal Fee after Jan 15th \$100.00

Type of Application: **NEW** _____ **RENEWAL** _____

NAME OF BUSINESS: _____

NAME OF OWNER: _____

BUSINESS ADDRESS: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____

TELEPHONE NUMBER: _____ **NUMBER OF EMPLOYEES:** _____

TYPE OF BUSINESS:

Retail _____ Service _____ Wholesale _____ Restaurant/food Service _____
* Contractor _____ **Home Occupation _____ ***Laundromat / Carwash _____

Describe products/services: _____

TYPE OF OWNERSHIP:

____ Sole Proprietorship ____ Association / Club
____ Partnership ____ Non-profit / Exempt # _____
____ Corporation ____ Other

Colorado State Sales Tax License # _____

I hereby certify that the statements made on this application are true and correct. I further certify that I have received a copy of the business license ordinance and agree to comply with the provisions contained therein.

Authorized Signature

Date

* **For Contractors:** Contractors are also required to carry a Town of Silt Contractor's license.

** **For Home Occupation:** Home Occupations require that a home occupation worksheet be completed and submitted with your business license application.

APPROVED BY:

TOWN PLANNER DATE

*** **For Carwash / Laundromat** **APPROVED BY:**

PUBLIC WORKS DIRECTOR DATE

2019

TO: All Town of Silt Business and Business Owners
FROM: Silt Police Department
RE: Emergency Contacts

The Silt Police Department requires that all new and existing businesses supply a name, address, and after-hour phone numbers of the person or persons who they may contact in case of an emergency after working hours. The Silt PD is requesting that this information be supplied annually, in conjunction with the annual renewal of the Town of Silt Business License and that all business owners inform the Police promptly of any changes in the supplied information.

All information supplied will be kept confidential within the Police Department and is requested solely for the protection of you and your business in case of an emergency.

Thank you for your cooperation in this matter.

BUSINESS NAME: _____

PLEASE DESCRIBE TYPE OF BUSINESS AND PRODUCT: _____

BUSINESS STREET ADDRESS: _____

BUSINESS MAILING ADDRESS: _____

BUSINESS PHONE: _____

BUSINESS HOURS (Days and Hours): _____

PERSON(S) TO CONTACT IN CASE OF EMERGENCY:

NAME	STREET ADDRESS	AFTER-HOURS PHONE
_____	_____	_____
_____	_____	_____

ALARM COMPANY: _____ **PHONE NUMBER:** _____

IF AN OPEN DOOR IS FOUND, DO YOU WANT THE POLICE TO: (Check One)

- _____ Enter building, or;
- _____ Call the emergency contact first.

Any additional information the business owner would like to supply, such as the location of main utility shut-offs, or alarm boxes, etc can be listed on another sheet of paper or on the back of this form.

LAWFUL PRESENCE AFFIDAVIT

(this form only needs to be filled out by applicants who are applying as a sole proprietor)

I, _____ swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

_____ I am a United States citizen, or

_____ I am a legal Permanent Resident of the United States, or

_____ I am otherwise lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Date

Per HB 06S-1023, you must provide a copy of one of the following IDs with this Affidavit.

- ✓ Colorado Driver's License
- ✓ Colorado ID card
- ✓ Military ID
- ✓ Coast Guard mariner document
- ✓ Native American tribal document

Town of Silt
P.O. Box 70, Silt, CO 81652
Sales Tax License 2019

FOR OFFICE USE ONLY:

Date Received _____ License No. ____

Business Owner: _____

Trade Name or DBA: _____

Business Location: _____

Phone: _____ **Contact Person:** _____

Mailing Address: _____

Type of Ownership: (check one)

Sole Proprietorship

Partnership

Corporation

Association / Club

Non-profit / Exempt # _____

Other

Nature of business / what do you sell: _____

State of Colorado Tax Number: _____

Date started / purchased business: _____

Estimates your monthly amount of taxable sales: _____

I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN ARE TO THE BEST OF MY KNOWLEDGE, TRUE, CORRECT, AND COMPLETE.

Name (Please Print) _____ **Title** _____

Signature _____ **Date** _____

Town of Silt

Home Occupation Worksheet 2019

Silt Municipal Code §17.08.110 – Customary incidental home occupations

A “customary incidental home occupation” means a use conducted on a residential property within town limits that meets the requirements of this section. A home occupation is “customary incidental” and allowed in any residential zone district of the town, and that the Silt Municipal Code (SMC) criteria is followed.

Name of business: _____

Type or nature of business: _____

1. Is this business regulated by a state or federal agency, or does it require special licensing or certification? Yes (Please list licenses or certificates you hold and submit copies of those licenses with this application) _____
_____ No _____

2. Is the home occupation conducted by the property’s occupants? Yes ___ No (please describe) _____

3. How many full time employees? _____ Part Time? - _____
For home childcare, how many children are you licensed to care for? _____

4. Is the home occupation clearly incidental and secondary to the residential use of the primary dwelling on the property? Yes _ No (please describe) _____

5. Will the home occupation require you to change any exterior feature of the residence, or to add additional parking? Yes (please describe) _____
_____ No _____

6. Are any retail sales or displays associated with the home occupation that is visible from the exterior of the home? Yes (please describe) _____
_____ No _____

7. Is there storage associated with the proposed home occupation? Yes ____ No ____
If yes, please answer the following:

- What is the square footage of the storage? (600 sf maximum) _____
- Is the storage visible from any public right-of-way? Yes (please describe) _____
_____ No _____

8. Are any materials associated with the home occupation classified as explosive, flammable, corrosive, or classified as hazardous materials by the EPA? Yes ___ No _____

(Please see SMC § 17.49, available online at www.townofsilt.org or at the Town Hall)

If yes, please answer the following:

- The Garfield County 911 Emergency Communications organization requires hazardous materials be registered, are yours? Yes ___ No ___
- Are all such classified materials stored, handled, used, or disposed of in accordance with all applicable municipal, state, and federal regulations? Yes ___ No (please describe) _____

9. Is less than twenty-five percent of the total floor space of any structure on such property used for the home occupation? Yes _____ No _____

10. Are you aware that business licenses must be renewed annually? Yes _____ No _____

11. Are you aware that renters must provide the Town with written consent from the property owner to conduct a home occupation? Yes _____ No _____

12. Does the home occupation conform to the commercial and industrial performance standards in the Silt Municipal Code §17.49? (This code is available online at www.townofsilt.org or at the Town Hall, 231 N 7th Street) Yes ___ No (please describe) _____

13. Does the home occupation conform to all applicable provisions of the Silt Municipal Code? (The Silt Municipal Code is available online at www.townofsilt.org or at the Town Hall at 231 N 7th Street) Yes _____ No (please describe) _____

14. Are you aware that the home occupation application may require an inspection of the premises by the Town Building Inspector? Yes ___ No ___

15. Are you aware that no more than two customary home occupations shall exist on one property, and are limited by the requirements of the Silt Municipal Code? Yes _____ No _____

16. Are you aware that every home occupation must be licensed? Yes _____ No _____

Applicant Signature

Date