

JUAB COUNTY BUSINESS LICENSE APPLICATION

160 North Main Nephi, UT 84648 435-623-3410

BUSINESS INFORMA	TION							
Business Name:								
Business Address:								
		STREET		CITY	STATE	ZIP		
Mailing Address:		STREET		CITY	STATE	ZIP		
Business Phone #:			Alt Phone #					
Email:	-		Website:	-				
Utah Sales Tax #:			State License #:					
Ownership Type:			Type of Business:					
□ Corporation	□ Partnership		□ Commercial	□ Home	□ On	line		
☐ Proprietorship	□ LLC		□ Sand Dunes	□ Gravel Pit				
Detailed Description of Business (please be as specific as possible)								
OWNER AND CONTA	ACT INFORMATION	ON						
Name:								
Address:								
51 "		STREET	0 11 51	CITY	STATE	ZIP		
Phone #:			Cell Phone #					
Email:			Website:					
Contact Role:	□ Owner	□ Manag	er 🗆 Employee	□ Other:				
Name:								
Address:		STREET		CITY	STATE	ZIP		
Phone #:		J	Cell Phone #	5	0,,,,,			
Email:			Website:					
Contact Role:	□ Owner	□ Manag		□ Other:				

I hereby make application for a business license within the corporate limits of Juab County, Utah, and outside the limits of incorporated cities and towns, and in accordance with Title 9 of the "Juab County Code" for the type of business listed.

A license shall not be issued, nor shall any business activity occur where a business fails to comply with any federal, state or local laws or regulations including those administered by the following county offices: Clerk, Zoning, Building Inspection, Health, Sheriff, Fire Marshal, Roads, Commission, and Board of License Equalization. Nor shall a license be issued when, due to failure to comply, the business is disapproved by one of the said offices. A Juab County Business license is valid only so long as any additional license, required by any other government agency, is obtained and only so long as that additional license is valid and not otherwise disapproved, expired or revoked. A license shall not be issued to any applicant which has been convicted of a felony or a crime of moral turpitude.

Any application for a business license or license renewal shall constitute an irrevocable consent of the owner and their agent(s) for such entry and inspection at reasonable times, until the license is disapproved, expired or revoked. As the business owner or responsible agent, I hereby certify that the information submitted in this application is accurate and I agree to abide by the terms and conditions of any business license issued as a result of said information. I understand that this application must be approved and a valid Juab County Business License issued before business activities may commence at this location.

I hereby certify that I have not been convicted of a felony or a crime of moral turpitude within the last (5) years.

Applicant's Sig	gnature	 Date			
	OFFICE USE ON	NLY – PROCESSING			
Date of Submission:	D	ite Distributed for Review:			
PLANNING & ZONING		FIRE MARSHAL			
☐ Submitted for Review☐ Approved☐ DeniedComments & Notes:	□ Review Not Needed □ Revisions Needed	□ Submitted for Review □ Approved □ Denied Comments & Notes:	□ Review Not Needed□ Revisions Needed		
Signature	Date	Signature	Date		
SHERIFF'S OFFICE		HEALTH DEPARTMENT			
□ Submitted for Review □ Approved □ Denied Comments & Notes:			□ Review Not Needed □ Revisions Needed		
Signature	Date	Signature	Date		
ROAD DEPARTMENT		BUSINESS LICENSING – CLER	RK'S OFFICE		
 □ Submitted for Review □ Approved □ Denied Comments & Notes: 	□ Review Not Needed □ Revisions Needed	☐ Approved ☐ Denied Comments & Notes:	□ Revisions Needed		
		Date ApprovedL	icense Issued:		
Signature	Date	Signature	Date		