

HUNTINGTON CITY
APPLICATION FOR BUSINESS LICENSE
PO BOX 126*HUNTINGTON UTAH 84528*435-687-2436*FAX 435-687-2267

Name of Business: S & G Irrigation LLC

Business Mailing Address:
PO Box 1037
Huntington, UT 84528

Business Street Address:
1910 W. 400 N.
Huntington, UT 84528

Business Phone No. 749-1776

Fax No. _____

State Sales Tax # 1399289-004-STE

Utah State License # (if applicable) _____ Expiration Date _____

Utah State Contractors License # _____ Classification(s) _____

Owner of Business: David Sebring Home Phone 749-1776

Owners Address: _____

Applicant/Manager Name: _____ Home Phone _____

Applicant/Manager Address: _____

Submit application allowing up to 30 days for processing.

Home or Premise Occupation applications must go before the Planning and Zoning Committee.

This application will be placed on the next council meeting agenda. Please attend to present you business for council approval.

This form is an application for a business license. The actual license will be issued only when this form is completed, submitted of payment, and meets all requirements. All information must be accurately completed or the issuance of a license will be delayed. It is a Class B Misdemeanor to own or operate a business in Huntington City without a business license.

Business License Renewals shall be due annually on the 1st of December each year. If the fee is not paid by January 10th, a 10% penalty will be assessed. If no payment is received by March 1st the business license will become null and void. A new application must then be resubmitted along with payment for all delinquent fees.

I, (We) _____ hereby agree to conduct said business strictly

in accordance with the laws and ordinances covering such business and swear under penalty of law the information contained herein is true.

Applicant Signature X [Signature] Date _____

City Use Only:

License No. _____ Date Issued _____

Amount Received \$ _____

Home or Premise Occupation put before the Planning and Zoning Committee

Approval Date 1-26-15

Disapproved _____

[Signature]
 Signature of Planning & Zoning Chairperson zoning administration

City Council Approval Date _____

Disapproved _____

Signature of Mayor _____

