749-9718
Jan

HUNTINGTON CITY

APPLICATION FOR BUSINESS LICENSE

PO BOX 126*HUNTINGTON UTAH 84528*435-687-2436*FAX 435-687-2267

Name of Business: Lost Treasures

Business Mailing Address: PO Box 838 Huntington Ut 84528-0838

Business Street Address: 110 N Main Huntington Ut 84528-0838

Business Phone No. 435-687-9066

Fax No.

State Sales Tax #

Utah State License# (if applicable)

Expiration Date

Utah State Contractor's License #

Classification(s)

Owner(s) Name: Bruce & Tammy Pierce ~~Elroy & Jan Mortensen~~

Home Phone No. 435-653-2808 435-653-2801

Owner(s) Address: PO Box 254 ~~PO Box 93~~ (If different from above) Elmo (City) ut (State) 84521 (Zip)

- Submit application allowing up to 30 days for processing.
- All applications must be approved by the Zoning Administer
- When completed, this application will be placed on the City Council agenda; please attend to present your business for City Council approval.
- This form is an application for a business license. The actual license will be issued only when this form is completed, submitted or 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 annually on the 1st of December each year. If the fee is not paid by January 15th, a 10% penalty will be assessed. Business licenses unpaid as of March 1st will become null and void. A new application must then be resubmitted along with payment for all delinquent fees.

I, (We) Bruce Pierce Tammy Pierce & ~~Jan Mortensen~~ Elroy Mortensen 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.

B Pierce Tammy Pierce — Applicant Signature — Date 5-16-16

Jan Mortensen E Elroy Mortensen — Applicant Signature — Date 5-16-2016

Official Use Only

License No

Date Issued

License Amount $

Approved at the _____ City Council meeting.
Date

Mayors Signature

Zoning Administrator

GARY 6050-1011