

Town of Jackson Business License Application

All payments shall be made at the time of application and shall be non-refundable unless the application is denied. If the Town denies a business license application, a refund will be issued, less a \$44.00 non-refundable application fee. Applications for a business license must be **submitted and approved by the Town before the business can begin operations.**



License will be DELAYED and can potentially be DENIED if any information is incomplete

Application Fee:	<u>Sales Tax Collecting Businesses</u>	<u>Non Sales Tax Collecting Businesses</u>	
	1- 10 employees = \$118.00	1 - 10 employees = \$154.00	
	11 - 49 employees = \$237.00	11 - 49 employees = \$343.00	
	50 - 99 employees = \$355.00	50 - 99 employees = \$462.00	
	100 + employees = \$592.00	100 + employees = \$770.00	
	<u>Commercial Property Rentals</u>	<u>Residential Rentals</u>	<u>Agent</u>
	1 or more rentals = \$120.00	3 or more rentals = \$120.00	0 employees = \$118.00

PO Box 1687, Jackson, WY 83001
P: (307)733-3932 F: (307)739-0919
www.jacksonwy.gov

A color copy of the owner's driver's license is required with the application.

Any change of location or ownership requires a new application, \$44.00 fee, and is subject to approval by the Town of Jackson

APPLICANT PLEASE PRINT LEGIBLY

Business Name: _____
Doing Business As (dba): _____
Nature of Business _____

Is the Business in your residence? Yes No If YES, submit Home Occupation Form if you are within Town limits
Notarized Letter of Authorization required if the location is rented or leased

Business Mailing Address: _____

Business Physical Address: _____

Business Phone number _____ **Business Email Address** _____

Was premise previously occupied? Yes No If so, was it a: Business Residence

If Business, what type of business? _____

Is the property rented/leased or owned? Yes No Notarized Letter of Authorization required if the location is rented/leased

If the Property is rented/leased, Name of the Property Owner: _____

Property Owner's Mailing Address: _____

Property Owner's Phone Number: _____

Where is the parking provided for your business? _____

How many parking spaces are allocated to this business? _____ **Square footage of Business Location:** _____

If Business is a restaurant, how many seats? _____ **Number of employees on payroll?** _____

Will you be posting a sign for your Business? Yes No

I, (print your full legal name) _____, do hereby swear and affirm the information I have supplied on this application is true and correct to the best of my knowledge.

STATE OF WYOMING)
)ss
COUNTY OF TETON) _____
Signature of applicant

SUBSCRIBED AND SWORN TO BEFORE ME BY _____ (printed name of applicant)

This _____ day of _____ 20_____

WITNESS my hand and official seal

Date:

License #:

New Application
Updated Application

For Official Use Only – Please Do Not Write Below This Line

Business is: Home Occupation Home Business Other

Zoning: UC UC2 UR AR AC SR R
 BC NC NC2 OP RB BP MHP

Business Physical Location: Within Town Limits In Teton County Out of Teton County

Approving Department	Initials	Date Approved	Comments
Building Department			
Fire Department			
Planning Department			
License Fee	\$	Date Paid	