



Diana Carroll
Grand County Clerk/Auditor
125 East Center Street
Moab, Utah 84532
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GRAND COUNTY BUSINESS LICENSE APPLICATION 2015

Date:

Utah State Sales Tax Number*

*Required

Grand County Business License No.

Date Issued:

Beer License No.

Cabaret License No.

Amount \$

Cash - CC - Check #

DO NOT WRITE IN THIS BOX - Grand County Use Only

Business Name:

Business Location:

City:

State:

Zip:

Mailing Address:

Phone Number: ()

Fax: ()

E-mail Address:

Owner(s) Name:

Type of Business (explain in detail):

Do you provide overnight accommodations such as rooms, camping or R.V. parking? YES _____ NO _____

I declare that the statements made in this application are true and complete to the best of my knowledge and belief.

Applicant Signature:

Applicants must obtain signatures from the Grand County Officials listed below.

Building Inspector 435-259-1345 * Planning 435-259-1343 * Fire Chief 435-259-5557 * Sanitarian 435-259-5602

Building Inspector Signature:

State Licensing Number (if required):

Zoning Administrator Signature:

Conditional Use Permit or Use on Review? YES _____ NO _____

Approved Zoning:

Fire Chief Signature:

Sanitarian: