It is time to renew your business license if you will be operating a business in Leeds in 2019. Doing so requires:

1. Completing a Business License Application
2. Submitting the completed Application, along with all required attachments (if any) no later than February 1, 2019 to the Town Clerk/Recorder
3. Accompanying the Application with a check for the license fee of $50.00 made payable to “Town of Leeds”

Any business preparing food must have a Permit to Operate and/or annual Health Permit from the Southwest Public Health Department. You may contact them at 986-2580. Any Health Department requirements must be met prior to the Town issuing a business license.

Contractors and other state licensees, such as cosmetology or barbering, among others, must submit a copy of their current State License along with their Business License Application.

Please remember all business licenses are $50.00 and the deadline is February 1, 2019. Beginning February 2, 2019 there will be a late fee of $5.00 in addition to License Fee. Doing business without a license is a Class B Misdemeanor.

You can renew your business license at Town Hall on Monday through Thursday, from 9:00 a.m. to 2:00 p.m. Remember to check our website - www.leedstown.org and note Leeds Businesses listed under “Community”, then “Local Businesses”. If you would like your business listed, please check the appropriate box on the application. If you find errors in your business listing, please notify the Clerk/Recorder by e-mail at clerk@leedstown.org or phone 879-2447 to have appropriate corrections made on the site.

If you are no longer in business, please check the “Business Closed” box on the Application, and mail it to the Town Hall or call the Town office at 879-2447 and we will remove your name from the business list.

PLEASE REMEMBER: Late fee of $5.00 will be charged for business license renewals received after February 1, 2019.

Sincerely,

Peggy Rosebush
Clerk/Recorder, Town of Leeds
TOWN OF LEEDS

2019 GENERAL BUSINESS LICENSE APPLICATION
AND AGREEMENT OF TERMS

PLEASE REMEMBER THIS IS ONLY AN APPLICATION AND NOT A BUSINESS LICENSE. You will receive your business license from the Town Clerk/Recorder after all necessary information has been provided and is correct and verified.

Please check applicable box:  ❑ New    ❑ Renewal (Must still complete form)    ❑ Address change

Please check if you are NO LONGER IN BUSINESS:  ❑ Date Business was discontinued__________

PLEASE PRINT CLEARLY

Business:
Name: __________________________________________
Street Address: __________________________________________
Mailing Address: __________________________________________
Business Phone: __________________ Fax Number: __________________
E-mail Address: __________________________________________ Website: __________________________________________

Owner of Property:
Name: __________________________________________
Address: __________________________________________
Home Phone: __________________ Business Phone: __________________

Applicant:
Name: __________________________________________
Street Address: __________________________________________
Mailing Address: __________________________________________
Home Phone: __________________ Cell: __________________
E-mail Address: __________________________________________
Description of business and what activity will take place:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Business is:  ☐ Corporation  ☐ Sole Proprietorship  ☐ Partnership  ☐ LLC

List all owners other than applicant. If a corporation, partnership, or LLC, list other officers, general partners or members. (*If New Applicant, or if information has changed from previous year, attach copy of Articles of Incorporation or Articles of Organization & Certificate of Registration.)

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Date of commencing business in Leeds:  ________________________________

Have you registered your business name with the State of Utah?  ☐ Yes  ☐ No  (*If new applicant, attach copy)

Federal Tax ID:  ________________________________  (*If new applicant, attach copy of IRS form SS-4.)

Utah Sales Tax Number:  ________________________________  (*If new applicant, attach copy of Sale Tax License from Utah State Tax Commission)

Is this a food or food preparation business?  ☐ Yes  ☐ No  (If yes, attach a copy of Permit to Operate and / or annual Health Permit from Southwest Public Health Department.)

Is this business required to be licensed by the State?  ☐ Yes  ☐ No  
If yes, indicate type and number:  ________________________________  (Attach Copy of State License)

Average number of employees:  ________________________________

Days & hours of operation:

Do you want your Business listed on the Leeds Town Website?  ☐ Yes  ☐ No
NOTICE:

Applicant’s signature indicates agreement to conduct the business in compliance with listed uses, Zoning Ordinance and all Ordinances that are applicable to the type of business being conducted. Any operations exceeding or not in compliance with Town of Leeds Ordinances require application for a Conditional Use Permit and said Permit will not be issued without prior recommendation from Planning Commission and approval from Leeds Town Council per the Land Use Ordinance.

FAILURE TO COMPLY WITH THE ABOVE CONDITIONS AND LEEDS ORDINANCES CAN RESULT IN SUSPENSION OR REVOCATION OF YOUR BUSINESS LICENSE AND IS A CLASS “B” MISDEMEANOR.

I HAVE READ AND UNDERSTAND, AM IN COMPLIANCE WITH AND WILL REMAIN IN COMPLIANCE WITH THE CONDITIONS OF THE LAND USE ORDINANCE 2008-04

Print Name ________________________________

Signature of Applicant ______________________ Date __________________

I understand that falsifying any information on this form constitutes sufficient cause for rejection or revocation of my business license. I also understand that the Town of Leeds may require additional information as permitted by ordinance, and also agree to supply the requested additional information as part of this form.

Authorized Representative

Signature ______________________ Date __________________

“Authorized Representative” shall mean: a) a responsible corporate officer, if the User is a corporation (i.e. a president, secretary-treasurer, or vice-president of the corporation, or the manager of one or more manufacturing, production or operation facilities, with authority to sign documents); b) a general partner or proprietor if the Industrial User is a partnership or proprietorship respectively; or c) a duly authorized representative (written authorization and written change of authorization are required) of the corporation, general partnership or proprietorship.

Applicant’s signature indicates agreement to conduct the business in compliance with listed uses, Zoning Ordinance and all Ordinances that are applicable to the type of business being conducted.

Deadline for filing business license renewal is February 1, 2019. Beginning February 2, 2019, a late charge will be assessed.

BUSINESS LICENSE EXPIRES ON December 31, 2019

For Town Use Only

Current Zoning: ________________________________

Clerk / Recorder ______________________________________ Date __________________

For fire inspection, please contact the Hurricane Valley Fire District at 435-635-9562, 202 East State Street, Hurricane, Utah 84737