



**COMMUNITY DEVELOPMENT DEPARTMENT**  
220 East Morris Avenue, Suite 200  
South Salt Lake City, Utah 84115  
(801) 483-6031 telephone  
(801) 483-6060 fax  
[www.southsaltlakecity.com](http://www.southsaltlakecity.com)

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## **COMMERCIAL BUSINESS LICENSE APPLICATION**

### **When is a business license required?**

A commercial business license is required for any commercial activity taking place in South Salt Lake. Your license is valid only for the address on the application. If your business has multiple locations within South Salt Lake, you will need a business license for each location. If you change locations within South Salt Lake, you will need to re-apply for a business license at the new location.

Approved business licenses from other jurisdictions, including any State or Federal permits, are not valid business licenses in South Salt Lake.

### **What is required as part of my business license?**

You will need to completely fill out the Business License Application and provide the City with proof that your business name has been registered with the Utah State Department of Commerce. You may be required to supply an occupational or professional license number and a State of Utah Sales Tax ID number. Application requirements may vary due to business type or proposed location.

### **When can I start business operations?**

You can start your business operations once your business license is issued by South Salt Lake City. Submitting a business license application does not authorize the applicant to conduct business until a license is issued. Conducting business without a license is a violation of City ordinances.

### **How long will it take for my license to be approved?**

South Salt Lake City guarantees that your license will be approved or denied, with notification sent to you within 30 days of receipt of your application. If you are applying for a new business or new business location, a building inspection will be required as part of the business license approval. A building inspector will contact you within 5 working days of your application submittal. The building inspector may require upgrades to ensure the health and safety of employees and customers. Building permits are required for building changes, additions, and remodels, and installation or alteration of signs.

All new business license applications are subject to approval from Planning and Zoning, Building Inspection, the Fire Marshal and the Salt Lake Valley Health Department prior to issuance of a business license and commencement of operations.

Certain business operations, such as those classified as conditional uses, may require a longer approval process.

## What is the process for renewing my business license?

All business licenses must be renewed annually. Businesses located east of 200 West renew in January. The City will mail a renewal notice approximately one month prior to the expiration date of the current license. To avoid late fees, business owners must return the business license renewal notice prior to the renewal deadline. Please note that although the City sends renewal notices to all businesses prior to the expiration of the current license it is ultimately the responsibility of the business owner to insure that the business license is renewed prior to the expiration date. Businesses west of 200 West renew in July. Business licenses issued in between the renewal periods will be charged a pro-rated fee of 50% of the base rate.

## What is the fee?

The business license fee depends on the business type and whether or not additional regulatory fees or penalties apply. Please refer to the table on the following page:

## Any other questions?

### **Business License Official**

Julie Taylor

(801) 483-6031

[julie.taylor@southsaltlakecity.com](mailto:julie.taylor@southsaltlakecity.com)

### **Business License Specialist**

Tracy Swenson

(801) 483-6063

[tswenson@southsaltlakecity.com](mailto:tswenson@southsaltlakecity.com)

### **Business License Inspector**

Jim Hignite

(801) 483-6006

[jhignite@southsaltlakecity.com](mailto:jhignite@southsaltlakecity.com)

### **City Planner**

Hayley Pratt

(801) 483-6011

[hpratt@southsaltlakecity.com](mailto:hpratt@southsaltlakecity.com)

### **Deputy Director / Housing Administrator**

Francis Xavier Lilly

(801) 412-3224

[flilly@southsaltlakecity.com](mailto:flilly@southsaltlakecity.com)

### **Director of Community Development**

Michael Florence

(801) 412-3225

[mflorence@southsaltlakecity.com](mailto:mflorence@southsaltlakecity.com)

**BUSINESS LICENSE FEES – AS OF 1 JULY 2014**

<b>COMMERCIAL BUSINESS LICENSE FEES</b>			
<b>License Type</b>	<b>Base Rate</b>	<b>License Type</b>	<b>Base Rate</b>
Amusement	\$147.00	Large Grocery Store	\$1,818.00
Auto Sales/Body/Repair/Towing	\$173.00	Live Entertainment	\$147.00
Check Cashing and Pawn	\$422.00	Lodging – Long Term	\$147.00 + \$89/unit
Booth Rental	\$18.00	Lodging – Short Term	\$147.00 + \$7/unit
Bowling Alley	\$1,354.00	Market/Bakery/Café	\$231.00
Construction/Manufacturing	\$302.00	Mini Storage	\$147.00 + \$.30/unit
Convenience Store – Non Prepay	\$4,318.00	Mobile Food Services	\$147.00
Convenience Store – Prepay	\$2,281.00	Mobile Homes	\$147.00 + \$101/pad
Convenience Store – without fuel	\$1,860.00	Movie Theatre	\$4,470.00
Day Care	\$369.00	Moving/Warehouse	\$312.00
Drug/Variety Store	\$2,052.00	Nonprofit	-
Fast Food	\$1,093.00	Nursing Homes	\$147.00 + \$50/unit
Financial Services	\$719.00	Personal Services	\$291.00
Golf	\$781.00	Private Club/SOB/Tavern	\$1,550.00
Home Occupation	\$18.00	Professional Services	\$225.00
Home Occupation Day Care	\$224.00	Restaurant	\$432.00
Horse Stables	\$180.00	Retail – General	\$372.00
Indoor Sports Training	\$1,720.00	Retail – Large	\$1,633.00
Insurance and Bail Bonds	-	Wholesale	\$366.00

<b>REGULATORY FEES</b>			
<b>License Type</b>	<b>Base Rate</b>	<b>Initial Application Fee</b>	<b>Requirements</b>
Beer – Class A retailer	\$300.00	\$300.00	
Beer – Class B restaurant	\$500.00	\$1,000.00	
Beer – Class C tavern	\$750.00	\$1,250.00	
Beer – Single Event	\$100.00	\$100.00	
Escort Bureau	\$2,000.00		
Escort Runner	\$300.00		
Escort Transfer Fee	\$50.00		
Escort Lost Permit Fee	\$25.00		
Fireworks Stand	\$94.00		\$50 deposit
Liquor	\$400.00		
SOB – Adult Business	\$300.00		\$2,000 bond
SOB – Outcall	\$600.00		\$2,000 bond
SOB – Semi-Nude Dancing Bar	\$300.00		\$2,000 bond
Tobacco	\$30.00		

<b>MISCELLANEOUS FEES AND PENALTIES</b>	
<b>Fee</b>	<b>Amount</b>
Operating prior to obtaining business license	100% of base rate
Operating without a business license	100% of base rate
Fire Damage and Close-out Sale	\$25 for the first 30 days / \$10 for 30 day renewal
Overdue Fees – 30 days	50% of base rate
Overdue Fees – 60 days	100% of base rate





# Commercial Business License Application

Community Development Department

220 East Morris Avenue Ste 200

South Salt Lake City, UT 84115

801.483.6063 / Fax 801.483.6060 / [www.southsaltlakecity.com](http://www.southsaltlakecity.com)

Application For:  New Business  Change of Ownership  New Location

1. BUSINESS NAME AND ADDRESS				
Business Name (must be registered with the Utah Department of Commerce)			Business Telephone	
Business Street Address	Suite or Unit	City	State	Zip
Business Mailing Address (if different)		City	State	Zip
2. BUSINESS OPERATIONS				
Describe your business operations in detail. Include an estimated starting date:				
How many off-street parking stalls do you have at your business location?		How many employees will you have at your business location?		
Is this a new type of business at this location? <input type="checkbox"/> Yes <input type="checkbox"/> No		Will your business operation involve hazardous materials? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Is a tenant finish or building remodel proposed for this business? <input type="checkbox"/> Yes <input type="checkbox"/> No		Would you like to be emailed about South Salt Lake City news and events? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Utah State Sales Tax #	EIN	Utah DOPL License #		
3. BUSINESS OWNER AND RESPONSIBLE PARTY INFORMATION				
Business Owner(s) and date(s) of birth (attach additional pages if necessary)		Address		
		City	State	Zip
Telephone		Email		
Responsible Party Name(s) and date(s) of birth		Address		
		City	State	Zip
Telephone		Email		

*This form is an application for a business license. The receipt of license fees does not constitute approval to operate a business. Business operations may commence only after all applicable approvals and a business license has been issued. Renewal of this license is the responsibility of the business owner. Failure to receive a renewal notice does not excuse this responsibility. Operating a business without an approved business license constitutes a Class C Misdemeanor.*

**I hereby agree to conduct said business strictly in accordance with all South Salt Lake City codes governing such businesses and swear under penalty of perjury that I have examined the information contained herein and to the best of my knowledge and belief, it is true, correct, and complete.**

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

<b>Office Use Only</b>	Date Received	Receipt #	License Fee	Regulatory Fee	License #
	Zoning Approval	Date	Notes		





## BUSINESS RESPONSIBLE LIST

Please fill out the form completely. This will allow the Police Department to contact responsible parties in case of emergencies.

1. BUSINESS AND OWNER NAME AND ADDRESS				
Business Name			Business Telephone	
Business Street Address		City	State	Zip
Business Owner Name		Cell Phone	Home Phone	
2. RESPONSIBLE PARTIES				
	Name	Cell Phone	Home Phone	
1 <sup>st</sup>				
2 <sup>nd</sup>				
3 <sup>rd</sup>				
4 <sup>th</sup>				
3. ALARM COMPANY INFORMATION				
Name			Telephone	
4. MISCELLANEOUS NOTES AND OTHER INFORMATION				
Please include entry codes for gates or doors, or locations of emergency key boxes, if applicable.				

If your information needs to be updated, please submit a new form to:

**South Salt Lake Police Department**  
**Attn: Dispatch**  
**220 East Morris Avenue, Suite 200**  
**South Salt Lake, Utah 84115**







**INDUSTRY DISCHARGE QUESTIONNAIRE**

New Business Form       Renewal Form

**Section: 1.**

Name of Business: \_\_\_\_\_  
Property Address: (street, city, zip) \_\_\_\_\_  
Mailing Address: (street, city, zip) \_\_\_\_\_  
Contact Person: (Name) \_\_\_\_\_  
Contact Person: (Title) \_\_\_\_\_ Phone # \_\_\_\_\_  
Facility is: Owned:  Leased:  Home Business:  Other: \_\_\_\_\_  
\* Need: Brief description of business, products produced, services provided, etc. \_\_\_\_\_  
\_\_\_\_\_

**Section: 2.**

Average Number of Employees: Day: \_\_\_\_\_ Afternoon: \_\_\_\_\_ Night: \_\_\_\_\_ Total: \_\_\_\_\_  
Check Types of Wastewater Discharges:  
Sanitary wastes (rest rooms)  Non-contact Cooling Water  Contact Cooling Water   
Equipment Wash down  Boiler Blow down

Process Waste Water Discharge(s):

*If no "Process Waste Water" go to Section: 3.*

Process Wastes: (List Types) \_\_\_\_\_  
Other discharges: \_\_\_\_\_  
List Expected Daily Water Use Gallons Per Day (GPD) \_\_\_\_\_  
Are any of your process discharges regulated by Federal Categorical Discharge Standards? Yes  No   
If yes, list Standards: Code of Federal Regulations (CFR) \_\_\_\_\_  
Will any chemicals be used or stored on site? Yes  No   
If yes, list chemicals that will be on site in quantities of 55 gallons or more on the back of this form.  
Will any hazardous waste be generated at this facility? Yes  No   
If yes, list types on the back of this form.

*Any Questions please call Central Valley Water Reclamation Facility Industrial Pretreatment Department (801) 973-9100*

**Section: 3.**

I have personally examined and am familiar with the information submitted in this report and any attachments. Based on my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the information reported herein, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

( FOR C.V.W.R.F. USE ONLY )

Business Classification: ( \_\_\_\_\_ ) \_\_\_\_\_  
Is there a (GOSI) Installed at this location: Yes  No       Is a (GOSI) Needed at this location: Yes  No   
Reviewed by: (CV) \_\_\_\_\_ Date: \_\_\_\_\_





## Additional Business Locations for a Sales Tax Account

*Do it all online: File and pay your taxes.  
Manage your account(s).*



### 1 — General Information

**1a. Social Security Number (SSN)**  
(required for individual sole proprietor)

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**Federal Employer Identification Number (EIN)**  
(required for all entities other than sole proprietor)

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**1b. Existing Sales Tax Account Number**  
(required for all accounts, if issued)

		S T C
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**1c. Name of Business Entity - PRINT** If you are a sole proprietor, write your name here

Daytime phone number

Owner's street address

Cell phone number

City

County

State

ZIP code

Business website address (URL)

### 1d. Certain Sales Activities

Mark "yes" for each question below that applies to any of the outlets you are reporting:

- a. Will you have sales of **grocery food**? .....  Yes  No
- b. Will you sell motor vehicles, aircraft, watercraft, manufactured homes, modular homes  
or mobile homes in municipalities imposing the resort communities tax? .....  Yes  No
- c. Will you have **retail sales of new tires**? .....  Yes  No
- d. Are you a **restaurant**? .....  Yes  No
- e. Will you **rent motor vehicles** to customers for 30 days or less? .....  Yes  No

### 2 — Additional/New Business Locations

<b>DBA/Business Name</b> Business or trade name at this physical location	Business start date for this location	<b>Office Use Only</b> County <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> City Code <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> SIC Code <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> USTC SIC <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> NAICS <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> <input style="width: 40px;" type="text"/> a. G   b. X   c. W   d. T   e. F   f. L
Physical street address of business (P.O. Box not acceptable)	Business telephone number	
City	County	
	State	
	ZIP code	
<b>Required:</b> Local Utah government issuing business license for this location		
<b>Business Description</b> If business or product is different from main business location, describe here for this location		
<b>Lodging Services:</b> Will you provide motel, hotel, trailer court, campground or other lodging services at this location? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Continued on next page (back side)**

<b>▶ DBA/Business Name</b> Business or trade name at this physical location		Business start date for this location		<b>Office Use Only</b>					
Physical street address of business (P.O. Box not acceptable)		Business telephone number				County	<input type="text"/>		
City	County	State	ZIP code			City Code	<input type="text"/>		
<b>Required:</b> Local Utah government issuing business license for this location						SIC Code	<input type="text"/>		
<b>Business Description</b> If business or product is different from main business location, describe here for this location						USTC SIC	<input type="text"/>		
<b>Lodging Services:</b> Will you provide motel, hotel, trailer court, campground or other lodging services at this location? <input type="checkbox"/> Yes <input type="checkbox"/> No				NAICS	<input type="text"/>				
				a. G	b. X	c. W	d. T	e. F	f. L

<b>▶ DBA/Business Name</b> Business or trade name at this physical location		Business start date for this location		<b>Office Use Only</b>					
Physical street address of business (P.O. Box not acceptable)		Business telephone number				County	<input type="text"/>		
City	County	State	ZIP code			City Code	<input type="text"/>		
<b>Required:</b> Local Utah government issuing business license for this location						SIC Code	<input type="text"/>		
<b>Business Description</b> If business or product is different from main business location, describe here for this location						USTC SIC	<input type="text"/>		
<b>Lodging Services:</b> Will you provide motel, hotel, trailer court, campground or other lodging services at this location? <input type="checkbox"/> Yes <input type="checkbox"/> No				NAICS	<input type="text"/>				
				a. G	b. X	c. W	d. T	e. F	f. L

### 3 — Authorized Signature

Signature of Authorized Applicant or Owner (Application will not be accepted without original signature)

Date



## Additional Business Locations for Sales Tax Accounts

### General Information

Use this form to register additional business locations for a new or existing sales tax account.

### Instructions

- 1a. You must provide a valid Social Security Number or Federal Employer Identification Number.
- 1b. If you are already registered with the Tax Commission and you are adding locations to an existing sales tax account, you must also provide your Sales Tax Account Number.
- 1c. You must provide the owner's name, daytime phone number, street address (PO Box not acceptable), city, county, state and ZIP.
2. You must provide all information for each location:
  - DBA/business name
  - Business telephone number
  - Physical street address of business
  - City, County, State and Zip code
  - Local government issuing business license
  - Business description, if business or product is different than at the main business location
3. An authorized applicant or owner must sign this form.

Return the completed form to the Tax Commission at the following address:

**Master File Maintenance  
Utah State Tax Commission  
210 North 1950 West  
Salt Lake City, UT 84134-3310**

Or fax to: **801-297-3573**