



City of Belgrade

91 E. Central Ave.
Belgrade, MT 59714
Phone: 406-388-3760
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APPLICATION FOR CITY BUSINESS LICENSE 2019

BUSINESS NAME AND MAILING ADDRESS: _____

NAME OF APPLICANT: _____

PHYSICAL ADDRESS IF DIFFERENT FROM ABOVE: _____

BUSINESS PHONE: _____ HOME PHONE: _____

EMAIL ADDRESS: _____

DESCRIPTION - EXACT NATURE OF BUSINESS: _____

OPERATING HOURS: _____ NO. OF EMPLOYEES: _____

ANTICIPATED IMPACT ON TRAFFIC FLOW: _____

TYPE OF SIGNS OR LIGHTS TO BE USED AT BUSINESS LOCATION: _____

CONTRACTOR'S LICENSE: _____

LIABILITY INSURANCE COMPANY: _____

BUSINESS REFERENCES AND PHONE NUMBERS:

1. _____ PHONE: _____
2. _____ PHONE: _____
3. _____ PHONE: _____

EMERGENCY CALL OUT INFORMATION:

1. _____ PHONE: _____
2. _____ PHONE: _____

ADDITIONAL INFORMATION: (ie-where is equipment stored)

ATTACHED HERETO IS MY **NON-REFUNDABLE** PAYMENT IN THE AMOUNT OF **\$50.00** FOR A BUSINESS LICENSE FEE. THIS APPLICATION FOR MY BUSINESS LICENSE IS MADE SUBJECT TO ALL THE TERMS AND CONDITIONS OF TITLE 2, BELGRADE CITY CODE AND AMENDMENTS OF THE CITY OF BELGRADE. THIS LICENSE IS NOT TRANSFERABLE. ALL LICENSES EXPIRE ON DECEMBER 31 OF EACH YEAR. ALL LICENSES SHALL BE PAYABLE YEARLY ON OR BEFORE JANUARY 1ST OF EACH CALENDAR YEAR. **PLEASE RETURN ENTIRE APPLICATION SIGNED AND DATED.**

SIGNATURE OF APPLICANT

DATE

For Office Use Only:

Police _____

Zone Off. _____

Fire Mar. _____

City Mgr _____

Rec # _____

Date PD _____

Lic # _____

Date Issued _____