

Date: _____

Name of Company/Individual			
Doing Business As (DBA)			
Business Address <i>(Street, City, State, Zip)</i>			
Mailing Address (if different) <i>(Street, City, State, Zip)</i>			
Local Business Phone: ()	Mailing Address Phone: ()	Business Fax: ()	Business e-mail:
Owner (s) Name & Phone <i>(if other than Sole Proprietor, list two names)</i>		()	
		()	

Description of Business Operations *(please be as detailed as possible):* _____

THE FOLLOWING MUST BE SUBMITTED WITH THIS APPLICATION:

- 1.) A copy of any licenses or approvals required by other government agencies (e.g., Environmental Protection Agency, Public Health Department or a State Licensing Agency)
- 2.) A fee of twenty-five dollars (\$25.00) per day for each day of sale.

(Continued On Back)

1.) I declare under penalty of perjury, that this application has been examined by me and that the statements made herein are to the best of my knowledge and belief, true, correct and complete.

2.) I swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

- I am a United States citizen, or
- I am a Permanent Resident of the United States, or
- I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature _____ Date _____

Title _____

For Departmental Use Only *(Do not write below)*

Fee _____	Expiration Date _____
Approved By _____	Date _____
Denial By _____	Date _____
Issued By _____	Date _____

Conditions of Approval:
