

**PEDDLERS, SOLICITORS AND TRANSIENT MERCHANTS
LICENSE APPLICATION**

**TOWN OF GRAND LAKE, COLORADO
P.O. Box 99
Grand Lake, Co 80447
Ph. (970) 627-3435/ FAX (970) 627-9290**

1. Indicate in proper space below the type of ownership:

Individual Co-Partnership
or Company Corporation Association
or Club Other

2. What do you sell? _____ Wholesale Retail

3. License to be issued in the name(s) of:

_____ Full Legal Name of Corporation, Owner/Applicant

4. Trade name: _____

5. Business address: _____
Street Address City County State Zip Code

6. Home Address _____ Phone _____

7. Date of sales in Grand Lake: From _____ To _____

8. If you have more than one place of business are you filing:

A tax return for each location A consolidated return for all locations

9. Indicate how you file your returns with the State:

Monthly Quarterly Yearly

10. State Sales Tax # _____ (Submit copy of license with completed application)

11. Attached is remittance in the sum of Fifteen Dollars (\$15.00) in payment of license.
(Fee is \$15.00 for 3 consecutive days. File 5 days prior to date upon which applicant desires to do business. **Please remit to the Event Sponsor, do not mail to the Town of Grand Lake.**)

I declare, under the penalty of perjury, that this application has been examined by me; that the statements made herein are made in good faith pursuant to Colorado Tax laws and regulations and, to the best of my knowledge and belief, are true, correct and complete.

Signature of Applicant _____ Title _____ Date _____

NOTE: If erecting a tent, NO stakes are allowed to be used in Town Parks due to possible damage to sprinkler systems. Please use sandbags or other such non-intrusive means.