

Initial Application

Renewal

# TOWN OF KIRTLAND

47 Road 6500 PO Box 1887

Kirtland, NM 87417

505-598-4160 • town@kirtlandnm.org

Registration # \_\_\_\_\_

Business Class # \_\_\_\_\_

## BUSINESS REGISTRATION/RENEWAL FORM

### BUSINESS CONTACT INFORMATION

Legal Corporate Name of Business	
Doing Business As	
Mailing Address	
Phone	
Physical Address/Location	
Contact Name and Title	
Phone	
E-mail	
Applicant is:	<input type="checkbox"/> Individual/Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Non-profit organization
For Individual/Sole and Partnerships: List Names and addresses of owners/partners	1
2	3
Emergency Contact Person	Name: _____ Phone: _____

### BUSINESS INFORMATION

Type of Business:	STATE LICENSE #:
STATE LICENSE TYPE:	STATE LICENSE STATUS:
<input type="checkbox"/> Manufacturing <input type="checkbox"/> Retail <input type="checkbox"/> Service <input type="checkbox"/> Construction <input type="checkbox"/> Wholesale <input type="checkbox"/> Financial/Insurance <input type="checkbox"/> Other	
Property Currently Zoned	Correct Zoning <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Are Flammable/Hazard materials stored or used in your business?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is there a Floor Plan on File with the Fire Department?	<input type="checkbox"/> Yes <input type="checkbox"/> No Date of Floor Plan _____
<b>BUSINESS TAX IDENTIFICATION NUMBER (BTIN)</b>	

### REGISTRATION FEE

**A nonrefundable \$35.00 per location annually.** Unless stated otherwise in the Kirtland Code. Please contact the Town Clerk for the fee amount for your type of business if you are unsure, as they can differ based on the type of business. Make Checks Payable to the **Town of Kirtland**.

**Payment will not be accepted if this application is not fully completed and returned along with payment.**

Amount Due:	\$ _____
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**I certify by my signature that all the information provided is accurate, true, and correct.**

### SIGNATURES

Signature	
Print Name and Title	
<b>FIRE MARSHAL'S SIGNATURE</b>	<b>DATE</b> _____
Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A <input type="checkbox"/>	
<b>TOWN OFFICIAL</b>	<b>DATE</b> _____

**Thank you, for doing business with the Town of Kirtland.**