CITY OF FEDERAL HEIGHTS

SALES TAX LICENSE APPLICATION

Please complete the following application and return it to the City of Federal Heights, 2380 West 90th Ave. Federal Heights, Colorado 80260.

_____ _____
Name of Business Date of Application

_____ _____
Address of Business in Federal Heights Business Phone Number

_____ _____
Mailing Address City State Zip Code Corporate Headquarters

_____
Contact email address

State Sales Tax Number _____ FEIN _____

Description of Primary Business Activity:

Nature of activities you wish permission to conduct (Please check all appropriate descriptions.)

__Retail Sales
__General Sales
__Wholesale Sales
__Outside Repairs
__Outside Storage
__ Warehousing
__ Leasing
__Manufacturing
__Animal Care
__Automobile Services
__Amusements
__Offices
__Food Preparation
__ Telecommunications
__Professional Services
__Repairs
__Deliveries
__Personal Services
__Recycling
__Construction

Filing Frequency Monthly _____ Quarterly *_____

To file quarterly, sales tax must be less than $100 per month.

There is no fee for a Sales Tax License.

Contact the Finance Department with questions at 303-412-3540.

_____ _____
Signature Date

_____
Print Name

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CITY APPROVAL _____