



APPLICATION FOR EXEMPT INSTITUTION LICENSE

CITY OF BOULDER, DEPARTMENT OF FINANCE
P.O. BOX 791
BOULDER, CO 80306
303/441-3050

License Fee \$25.00, Make Check Payable to the City of Boulder.

Name of Business _____

Address _____

City, State & Zip Code _____

Mailing Address if different _____

City, State & Zip Code _____

Phone Number _____ Contact Person _____

Form of business _____ Date of IRS 501(c)(3) Letter _____

For Office Use Only:

Approved Denied Account Number _____ Date _____

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

Applicant's Signature _____

Title _____ Date _____

Please note that a copy of the exempt entity's IRS 501(c)(3) letter must be remitted with this application. Remit the application, IRS letter and a \$25.00 check, for the one time application fee, to the above address.

CITY OF BOULDER BUSINESS LICENSE APPLICATION
SALES/USE TAX - ADMISSIONS - ACCOMMODATIONS LICENSE

ATTACHMENT FOR BUSINESS LICENSES:
ZONING CONFIRMATION FORM

City of Boulder – Planning & Development Services
1739 Broadway, 3rd Floor
P.O. Box 791, Boulder, Colorado, 80306
(303) 441-1880

The information provided on this form is intended to help specify the use category of the business operation. Please note that the type of business specified for Standard Industrial Coding (SIC) and sales tax licensing may be different than the use category determined for planning purposes.

GENERAL DATA

(To be completed by the applicant.)

PROPERTY

- Street Address: _____
- Lot Area (in square feet or acres): _____ Existing Zoning: _____
- Existing Use of Property: _____
- Is this application a renewal of current sales tax license?(check one) New Modification

PROPOSED USE

- Business Name: _____
- Description of proposed use (Include as applicable, proposed use, if it is a home occupation business, and summarize type of business activity):

CONTACT INFORMATION

- Name of Owner or Representative: _____ E-mail: _____
- Address: _____ Phone: _____
- City: _____ State: _____ Zip Code: _____ FAX: _____
- Size of Business (in square feet): _____
- Hours of Operation: _____
- Use Category (see page 2): _____

Complete all applicable portions of page 2 of this form and return this form with your sales tax application.

I have read and understood and agree to all of the conditions in this 2 page form. I certify that the information and exhibits herewith submitted are true and correct to the best of my knowledge and that in filing the application I understand that there may be additional reviews required to complete the planning process.

Signature: _____ Date: _____

STAFF USE ONLY

Application reviewed by: _____ Date: _____
Zoning District: _____ Use Category: _____
Previous Reviews: _____
Further Discretionary Review Required: _____

For Restaurant Businesses:

- Total Business Size (in square feet): _____ Number of Interior Seats (if applicable): _____
- Size of Outdoor Patio (in square feet): _____ Number of Patio Seats (if applicable): _____
- Hours of Operation for both outdoor patio and inside location: _____

For Home Occupation Businesses:

I, _____, understand the provisions of the Home Occupations Statute (Title 9, Chapter 6-3 (e) of the Revised Code of the City of Boulder) which are listed below, and agree that all actions at my home located at _____, will be in conformance with these regulations. The nature of my home occupation business is as described in the description of proposed use herein.

Title 9, Chapter 6-3 (e) Home Occupations.

(a) **Standards.** A home occupation is a permitted accessory use if the following conditions are met.

- (1) Such use is conducted entirely within a principal or accessory building and is not carried on by any other person other than the inhabitants living there.
- (2) Such use is clearly incidental and secondary to the residential use of the dwelling and does not change the residential character thereof.
- (3) The total area used for such purposes does not exceed one-half the first floor area of the user's dwelling unit.
- (4) There is no change in the outside appearance of the dwelling unit or lot indicating the conduct of such home occupation, including without limitation, advertising signs or displays.
- (5) There is no sale of materials or supplies except incidental retail sales.
- (6) There is no exterior storage of material or equipment used as part of the home occupation.
- (7) No equipment or process is used in such home occupation that creates any glare, fumes, odors, or other objectionable condition detectable to the normal senses at boundary of the lot if the occupation is conducted in a detached dwelling unit, or outside the dwelling unit if conducted in an attached dwelling unit.
- (8) No traffic is generated by such home occupation in a volume that would create a need for parking greater than that which can be accommodated on the site or which is consistent with the normal parking of the district.

(b) **Prohibitions.** No person shall engage in a home occupation except in conformance with all of the requirements of subsection (a) of this section.

For Marijuana Businesses: New Application Modification to an Existing Application

- Size of Business (in square feet): _____ Retail Hours: _____ No. of Rooms: _____
- Use Category (please check only one):

For Medical Marijuana Businesses: Medical marijuana, Personal Service Medical marijuana, Grows-Greenhouse/Nursery

For Recreational Marijuana Businesses: Recreational marijuana, Personal Service Recreational marijuana, Grows- Greenhouse/Nursery

Marijuana business, Manufacturing Infused Product Marijuana Business, Testing Facility