

# CITY OF VICTOR, COLORADO

P. O. Box 86, Victor, CO 80860

1-719-689-2284

2016 Temporary Business License for Vendor or Garage Sale

Fee: \$10.00 per day or \$25.00 for 3 days

Business Name \_\_\_\_\_

Name of Event \_\_\_\_\_

Dates of Event \_\_\_\_\_ No. of Days \_\_\_\_\_ Fee \_\_\_\_\_

Name of Applicant/Owner \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Physical Address \_\_\_\_\_ Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Nature of Business \_\_\_\_\_

Fed. Employee ID No \_\_\_\_\_ CO Sales Tax License No \_\_\_\_\_

**Contact in case of an emergency:** Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

*I, the undersigned, am aware that a 6.9% sales tax is applicable in Victor and that I am obligated to research the regulations relative to collecting and paying those taxes. I also certify that I am operating under all laws of the State of Colorado and of the United States that are applicable to the operation of my business under this license.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**THIS LICENSE MUST BE CONSPICUOUSLY DISPLAYED THROUGHOUT OPERATION**

## CITY OF VICTOR, COLORADO

### Temporary Vendor/Garage Sale License

This license is valid for the dates of \_\_\_\_\_ through \_\_\_\_\_

For operation of a  Vendor Booth  Garage Sale  Other \_\_\_\_\_

At (Physical address or event name) \_\_\_\_\_

Fee: \_\_\_\_\_ Receipt No. \_\_\_\_\_  Cash  Check  Other \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of City of Victor City Clerk, Deputy City Clerk or Authorized Representative