



OUTDOOR VENDOR LICENSE APPLICATION INSTRUCTIONS

GENERAL INFORMATION:

- Application packets with missing information/documentation will not be processed.
- Include:
 - Address of the physical location of the business
 - Mailing address where business licenses/renewals should be sent
 - Mailing address where sales tax information should be sent
- Email addresses are required.
- A [NAICS Code](#) is required.
- The number of full-time and part-time employees is required.
- Reporting frequency and estimated sales/use tax liability is required.
 - The City follows the [State of Colorado's filing frequency](#).
- Must provide description of vehicle, pushcart, kiosk, or other structures used in the operation.
- Must provide any vehicle license or registration information (if applicable).
- All locations where business will be conducted on private property, written permission from the owners of the property, and plan drawing for each location on private property.

ADDITIONAL FORMS:

- Home Occupation Permit Application – This form is required to obtain a permit for home-based businesses.
 - **NOTE:** Businesses with commercial locations should not complete this form.
- Mobile Retail Food Truck, Trailer or Cart Registration

ADDITIONAL DOCUMENTATION:

- Proof of Colorado Department of Revenue Sales & Use Tax License.
- Proof of liability insurance.
- Plan drawings for each location on private property (if applicable).
- Written permission from property owners for locations on private property (if applicable).
- Copy of Weld County Retail Food License (current health permits from other counties are acceptable) - *food vendors only*.
- A copy of a current Mobile Food Unit (MFU) fire inspection is required for all individuals or businesses operating a Mobile Food Unit in the City of Greeley (Weld County).
 - Fire inspections completed by other Colorado fire authorities will be accepted, provided the inspection was performed by a jurisdiction that is a member of the Fire Marshals Association of Colorado (FMAC), and the inspection was conducted by an inspector who meets the established qualifications for performing Mobile Food Unit fire inspections.

ADDITIONAL INFORMATION

- [City Business Licenses and Resources](#)
- [City Sales Tax Information](#)

**Business & Outdoor Vendor Application**

Finance Department

1100 10th St.

Greeley, CO 80631

Telephone: (970) 350-9733

greeley.salestax@greeleygov.comwww.greeleyco.gov**In order to ensure processing, please fill in fields in legible print. Incomplete applications will not be processed.**

Business Name & Type of Entity		FOR CITY USE ONLY	
1) Legal/True Name of Business (Last, First if Individual). Repeat on Page 2 & 3		ACCT #	SQ. FT.
		PROP ID	GEO
2) Trade Name/Doing Business As (DBA) of Business			
3) Reason for Filing (check only one) ☐ New Business (Including new location) ☐ Update Information for Account: ☐ Business Purchased or Merged ☐ Renewal		5) Type of Ownership (check only one): ☐ Individual/Sole Proprietor ☐ Corporation (Including PC) ☐ Limited Liability Company (LLC) ☐ Partnership (General or Limited) ☐ Limited Liability Partnership (LLP or LLLP) ☐ Non-Profit ☐ Trust ☐ Government ☐ Other Entity Type:	
4) Location/Account Type (check only one): ☐ Commercial (Including retail, office, and industrial locations) ☐ Home Occupation (Home Occupancy Permit Form required) ☐ Out of City Location(s)			
Location Information			
6) Location Manager Name		7) Location Phone Number	8) Location Fax Number
9) Location Street Address with Suite Number (No PO Boxes)			
10) City	11) State	12) Zip Code	13) Location Manager E-mail Address
Business Licensing Mailing Information (This is where your Business License and Certificate of Occupancy will be mailed)			
14) Send Business Licensing Correspondence Care Of		15) Licensing Phone Number	16) Licensing Fax Number
17) Check the following if the licensing address is: ☐ Same as Location Address (lines 9 - 13 above)		18) Mailing Address for Business Licensing Correspondence	
19) City		20) State	21) Zip Code
Tax Mailing Information (This is where your tax booklet and any tax information will be mailed)			
22) Send Tax Correspondence Care Of		23) Tax Phone Number	24) Tax Fax Number
25) Check one of the following if the tax address is: ☐ Same as Location Address (lines 9 - 13 above) ☐ Same as Licensing Address (lines 18 - 21 above)		26) Mailing Address for Tax Forms, Notices, and Correspondence	
		27) City	28) State
		29) Zip Code	
30) Check one of the following if the records address is: ☐ Same as Location Address (lines 9 - 13 above) ☐ Same as Licensing Address (lines 18 - 21 above) ☐ Same as Tax Address (lines 26 - 29 above)		31) Address where Tax Records may be Inspected (No PO Boxes)	
		32) City	33) State
		34) Zip Code	
Tax Contact E-mail Address Primary E-mail Address:		Alternate E-mail Address:	
This form has 2 pages. Both pages must be completed. Incomplete applications will not be processed.			

		35) Legal/True Name of Business (From Part A, Line 1)						
PART C - Owners/Officers	36) Name of principal officer, owner, partner, member, or manager	37) Title						
	38) Address of principal residence	39) City	40) State	41) Zip Code				
	42) Name of other officer, owner, partner, member, or manager	43) Title						
	44) Address of principal residence	45) City	46) State	47) Zip Code				
Additional officers, owners, partners, members, or managers may be included on attachments.								
PART D - Business Inception & Operations	48) Legal Name of Prior Business (if purchased or merged)					49) Purchase/Merge Date		
	50) Date Started or Date Business Will Open							
	51) Hours of Operation (local businesses only)							
		Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	From:							
	To:							
	52) Website Address			53) NAICS Code:		Number of Employees at this Location		
						54) FT	55) PT	
	56) Primary Business Type (check only one) ☐ Retail Trade ☐ Wholesale Trade ☐ Transportation, Warehousing ☐ Manufacturing or Processing ☐ Agriculture ☐ Utilities ☐ Real Estate, Rental & Leasing ☐ Professional or Service ☐ Construction ☐ Information ☐ Natural Medicine ☐ Accommodation, Food Services ☐ Health Care ☐ Other:							
	57) Check this box ☐ if you intend to sell liquor.		58) Description of Goods Sold or Services Provided				59) State Child Care License Number	
60) Requested Reporting Frequency								
☐ Monthly ☐ Quarterly ☐ Annually ☐ Occasional Filer Estimated Annual Sales/Use Tax Liability:								
Every business must file at least annually, even if no tax is due. All businesses, including those that do not make taxable sales, will likely have a use tax liability.								
Signature of Applicant or Authorized Agent	Signature					Date		
	Print Name					Title		
PART E - Outdoor Vendor Information	Outdoor Vendor License Application							
	1) Business Type (check all that apply): ☐ Construction Mobile Food Vendor ☐ Mobile Food Truck ☐ Neighborhood Mobile Food Vendor ☐ Outdoor Vendor of Miscellaneous Goods & Services ☐ Outdoor Vendor of Transportation Services ☐ Pushcart ☐ Other (describe below):				2) Application Type (check one): ☐ New Business ☐ Renewal ☐ Information Change			
	3) Description:							

4) Legal/True Name of Business (From Part A, Line 1)						
PART F - Description	5) Description of the design of any vehicle, pushcart, kiosk, table, chair, stand, box, container or other structure or display device to be used in the operation by the applicant, including the size and color, together with any logo, printing or sign which will be utilized by the applicant:					
	6) Vehicle License Plate and Registration Information					
PART G - Location Information	Private Property Location(s)					
	7a) Street Address with Suite Number (No PO Boxes)			7b) Street Address with Suite Number (No PO Boxes)		
	8a) City	9a) State	10a) Zip Code	8b) City	9b) State	10b) Zip Code
	7c) Street Address with Suite Number (No PO Boxes)			7d) Street Address with Suite Number (No PO Boxes)		
	8c) City	9c) State	10c) Zip Code	8d) City	9d) State	10d) Zip Code
PART H - Outdoor Vendor Checklist	☐ Application Fee ☐ Proof of Liability Insurance ☐ Plan drawing of each location on private property ☐ Weld County Retail Food License ☐ Documentation of Colorado Department of Revenue Sales & Use Tax License ☐ Completed Outdoor Vendor Application ☐ Completed Business Application ☐ Home Occupation Form (If applicable) ☐ Mobile Retail Food Truck, Trailer or Cart Registration Form					
	Signature of Outdoor Vendor Applicant or Authorized Agent			Signature Print Name		Date Title