



401 Locust Street • P.O. Box 435 • Frederick, CO 80530-0435

Phone: (720) 382-5500 • Fax: (720) 382-5520

www.frederickco.gov

BUSINESS LICENSE APPLICATION
Please Print

Business Information

Trade Name (DBA): _____

Location of Business _____

Street Address City State Zip

Mailing Address: _____

Street Address City State Zip

Phone No. _____ Fax No. _____ E-mail address (required) _____

State Sales Tax I.D.: _____

Please supply the Town with a copy of your Certificate of Good Standing. If you are a sole proprietor please complete the Lawful Presence Affidavit

Business Owner Information

Owner Name: _____

Owner Address: _____

Street Address City State Zip

E-mail Address (required): _____

Property Owner Information

Owner Name: _____

Owner Address: _____

Street Address City State Zip

E-mail Address (required): _____

License Information

Do you own the building where the business is located? Yes No If No, please provide the following:

Length of Lease: _____

Building Owner Name _____

Street Address City State Zip



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Please describe your daily business operations and how you plan to utilize the site. (2 – 3 Sentences):

Is this a home based business? Yes No

Type of Business: Retail Manufacturing Service Warehouse Office

Other (please describe) _____

Total Square Feet of Building _____. Square Feet Occupied by Business _____.

Square Footage Breakdown of use. E.g. office, warehouse, or storage space:

What is the Zoning for this Business location (please contact the Planning Department with questions 720-382-5610)? _____

Is this a new business to Frederick OR a new location within Frederick? _____

Date business opened at this location _____

Maximum number of customers on site served at one time _____

Please list the total number of parking stalls on site _____ Handicap Parking stalls _____

Is there public or other parking available? Yes No.

If so, how many spaces _____ and distance from business to public parking _____

Number of Employees: _____ Full Time _____ Part Time



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Will there be any new construction (Construction, alteration or repairs to the structure as well as electrical, gas, mechanical, or plumbing construction, alteration or repairs)? Yes No. (Please contact the Building Department to verify whether you need a permit for modifications to your location 720-382-5605)

If so, please describe _____

Will there be a new sign or temporary signs associated with the business? Yes No.

Please be advised that there are specific regulations regarding signs in the Town of Frederick. See Article 7 of the Land Use Code for details, online at

<https://frederick.municipal.codes/LUC/7>

Will there be overweight vehicles used in conjunction with the business? Yes No.

Please be advised that overweight vehicles require permits issued by the Engineering Department, see on our website at:

<https://www.frederickco.gov/329/Oversize-Overweight-Vehicles>

Typical hours of operation _____.

Note that our lighting code limits illumination of exterior lighting to one hour before opening and to one hour after business closing.

Would you like to be included on the Town of Frederick's Online Resource Directory? Yes No.

If yes please provide the following information.

Website: _____

I declare under penalty of perjury in the second degree that the statements made in this questionnaire are true and complete to the best of my knowledge.

Authorized Signature: _____ Date: _____

Printed Name: _____ Title: _____



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Date: _____

Name of Business: _____

Business Address: _____

Mailing Address: _____

Business Phone #: _____

E-Mail Address: _____

Alarm YES NO *If yes, please provide;*

Alarm Company: _____

Alarm Company Phone Number: _____

Any particular hazards at this address? (Please describe) _____

After Hours Contacts:

1. Name: _____

Home Phone #: _____ Cell : _____

2. Name: _____

Home Phone #: _____ Cell #: _____

3. Name: _____

Home Phone #: _____ Cell #: _____

Please submit a copy of your Certificate of Good Standing with your application.