

# BUSINESS LICENSE APPLICATION



City of Box Elder  
420 Villa Drive, Box Elder, SD 57719  
Phone: 605-923-1404 Fax: 605-923-4264  
The City of Box Elder is an Equal Opportunity Provider

Application for license to engage in the business of General or Regulated business located in the City of Box Elder, South Dakota for the calendar year of \_\_\_\_\_.

NEW GENERAL APPLICATION  GENERAL RENEWAL  NEW REGULATED APPLICATION  REGULATED RENEWAL

## SECTION I - BUSINESS INFORMATION

- General License       Adult Oriented Business Establishment       Amusements       Contractors
- Delivery Men, Taxi Drivers, and Expressmen       Delivery Vehicles and Trucks       Electricians
- Family (In-Home) Daycares       Food Service       Fortunetelling/Clairvoyant
- Heating, Ventilation, and Air Conditioning (HVAC)       Mobile Food Vendor       Pawnbrokers
- Junk Dealers, Secondhand Goods Dealers, and Dealers in Precious Metals and Gems
- Passenger Service Vehicles       Peddlers, Solicitors, and Employment Agencies

BUSINESS (OR DBA) NAME	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LLC <input type="checkbox"/> OTHER _____
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APPLICANT (LAST, FIRST, MI)	STREET ADDRESS OF BUSINESS
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CITY	STATE	ZIP	PHONE
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EMAIL	STATE SALES TAX OR EXCISE TAX ID # (Attach copy of license)
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## SECTION II - PREMISIS INFORMATION

Check here if this is a renewal and all premises information remains the same as the original initial application and skip to Operations Information.

Zoning: The proposed business is located within the appropriate zoning district:  Yes  No

Occupancy: Has a Certificate of Occupancy been obtained:  Yes  No

Will the applicant's business need any anticipated building or construction-related permits upon approval of this license?  Yes  No If yes, explain:

Are there any changes to the floorplan or layout?  Yes  No, If yes include a o scale floorplan with application.

Note: Issuance of a business license does not eliminate the need for any other applicable license (i.e., building permits, conditional use permits, etc.)

## SECTION III - OPERATIONS INFORMATION

### HOURS OF OPERATION

SUN: \_\_\_\_\_ MON: \_\_\_\_\_ TUE: \_\_\_\_\_ WED: \_\_\_\_\_ THU: \_\_\_\_\_ FRI: \_\_\_\_\_ SAT: \_\_\_\_\_

RULES OF OPERATION/DESCRIPTION OF BUSINESS (ATTACH MORE SHEETS IF NECESSARY). IF RENEWAL AND NO CHANGES SINCE INITIAL APPLICATION CHECK THIS BOX

## SECTION IV - DOCUMENTATION

### DOCUMENTATION NEEDED BASED ON BUSINESS TYPE

Background Check(s)  
Mobile Food Vendor

Current Vehicle Inspections  
Passenger Service Vehicles

CPR/FIRST AID CERTIFICATION  
Family (in-Home) Daycare

Food Service License  
Mobile Food Vendor  
Food Service

Sub-Contractor List  
Contractors  
Electricians  
Plumbers/HVAC

Facility Inspection  
Pet Daycare  
Kennels

Department of Health Inspection  
Mobile Food Vendor  
Food Service

SD Electricians License  
Electricians

HVAC Requirements  
Workers Comp Policy, Contractors License #, Number of years' experience, years in business, type of contracting, trade school attended, four references.

SD Plumbers License  
Plumbers

**ALL REGULATED BUSINESSES MUST PROVIDE PROOF OF INSURANCE AND DRIVER'S LICENSE**

## SECTION V - PERSONNEL

PRIMARY CONTACT NAME

TITLE

MAILING ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL

## SECTION VI - AUTHORIZATION TO USE PROPERTY FOR A BUSINESS

BUSINESS NAME	APPLICANT
STREET ADDRESS OF BUSINESS:	

**As owner of the real property listed above, I hereby authorize the submission of this application for my property to be used as a Business Establishment.**

**I understand that the lessee must operate the business on the property described above under provisions of the City of Box Elder's Municipal Code of Ordinances. I further understand that my property must meet certain zoning requirements and comply with applicable federal, state and local laws and building codes.**

**In exchange for good and valuable consideration, the receipt and adequacy of which is hereby acknowledged, I hereby release the city, its officers, elected officials, employees, attorneys, and agents from all liability for any and all claims and demands, or causes of action of any kind whatsoever, present or future in any way relating to or arising from the lessee/licensee's business operation upon said property.**

PROPERTY OWNER SIGNATURE	DATE	
PRINTED NAME OF PROPERTY OWNER/AGENT	PHONE NUMBER	LEASE EXPIRATION DATE
PROPERTY OWNERS ADDRESS		

## SECTION VII - AFFIRMATION AND CONSENT

LICENSE OR BUSINESS NAME

I, \_\_\_\_\_ (printed name), as the applicant or as an authorized agent, officer, or manager for the applicant, declare under the penalty of perjury and under penalty for offering a false instrument for recording that this entire application, statements, and attachments are true, correct, and complete to the best of my knowledge. I further declare & consent that:

1. This statement is executed with the knowledge that misrepresentation or failure to reveal information requested may be deemed sufficient cause for the denial of this license application by the City of Box Elder (initial here) \_\_\_\_\_
2. I consent to any background investigation necessary to determine my present and continuing suitability and that consent continues as long as I hold a City Regulated Business License (initial here) \_\_\_\_\_
3. I understand and acknowledge that the City Finance's Office and the State of South Dakota may request other information from me in connection with this application. Failure to provide the requested information may result in denial of this application (initial here) \_\_\_\_\_
4. I understand this license shall not be transferable to any other person, business entity, or location and is not a property right (initial here) \_\_\_\_\_
5. I understand that the licensed business establishment must maintain legal possession of the licensed premises at all times (initial here) \_\_\_\_\_
6. I understand that the entire location premises shall be subject to inspections by relevant authorities at all operational hours and other times of apparent activity (initial here) \_\_\_\_\_
7. I hereby state that I have read SDCL Chap. 34-20G, all applicable State rules and regulations, and City of Box Elder Code of Ordinances Chapter 8 regarding Regulated and General Business licensing rules and regulations, and I understand the contents thereof and agree to be bound by them in all respects, expressly including the waiver of liability, release of claims, and indemnification of the City of Box Elder and others contained in the City of Box Elder's Businesses Ordinance (initial here) \_\_\_\_\_
8. I understand that any Regulated and General Business license issued by the City of Box Elder is conditional, and must be annually renewed by application submitted no less than forty- five (45) days prior to the last day of the calendar year for the upcoming year, unless earlier revoked or surrendered (initial here) \_\_\_\_\_

I have completed all the above information and understand my responsibilities as a regulated or general business applicant, licensee owner, or manager. I further understand that failure to comply with any law, regulations, or provisions of this affirmation may be grounds for disciplinary action, including, but not limited to, the suspension or revocation of the license.

APPLICANT SIGNATURE

TITLE

DATE

Note: Business License Fees are outlined in the City of Box Elder Ordinance Adopting a Comprehensive Schedule of Fees and Charges and are subject to change.

Submit this application with the required attachments and applicable application fee(s) to the Finance Office, 420 Villa Drive, Box Elder, SD 57719. If you have any questions, please call (605) 923-1404. The first Annual Fee is due upon receipt of Certificate of Occupancy.