

**Town of Aguilar Business License Application**  
**101 W. Main Street, P.O. Box 538, Aguilar CO. 81020**  
**(719) 941-4360 Fax (719)941-4395**

Please check all that apply:

<input type="checkbox"/> New business	<input type="checkbox"/> Renewal of existing license
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Change of Business Name
<input type="checkbox"/> Corporation	<input type="checkbox"/> Change of Business Address
<input type="checkbox"/> LLC/LLP	<input type="checkbox"/> Change of Mailing Address
<input type="checkbox"/> Non-Profit	<input type="checkbox"/> Other

**Section 1: General Business Information**

Business Name:		Doing Business As:	
Business Street Address			
City	State	Zip Code	Phone No.
Business Mailing Address			
City	State	Zip Code	Fax No.
Email Address		Website	

**Section 2: Owners Information**

First Name		Last Name	
Address			
City	State	Zip	
Phone No.		Alternate Phone No.	

**Section 3: Type of Business**

<input type="checkbox"/> Retail	<input type="checkbox"/> Services	<input type="checkbox"/> Contractor	<input type="checkbox"/> Other
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Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Approval Signature \_\_\_\_\_ Date \_\_\_\_\_

License No. \_\_\_\_\_