



Town of Ignacio

License #: \_\_\_\_\_ - 2024

# Business Service License Application 2024

For a business located outside Town limits

Date of Application: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

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

Business Physical Address: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Business Service License \$50.00 (Expires 1 year after date of payment)**

**\*\* This application is for a business with no physical address in Town and/or working under contract \*\***

Type of Business: \_\_\_\_\_

Location of Work: \_\_\_\_\_

Vehicle Description: \_\_\_\_\_

State Registered: \_\_\_\_\_ License Plate: \_\_\_\_\_

Plumber or Electrician Colorado State License Number: \_\_\_\_\_

**Any company/person working on property owned by the Town of Ignacio and/or the Right-of-Way must have insurance not less than \$300,000 for a Handyman and \$1,000,000 for an Excavator, Roofer, and/or Tree Cutter.**

**Applicant Initials**

\_\_\_\_\_

Please provide a Bond or a Certificate of Liability Insurance naming the Town of Ignacio as additionally insured.

Name of Insurance/Bond Company: \_\_\_\_\_

**I agree to comply with all requirements set forth in the Town of Ignacio Municipal Code.  
I am aware that the Municipal Code is available online at [www.townofignacio.com](http://www.townofignacio.com).**

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

Total Paid: \_\_\_\_\_ Received by: \_\_\_\_\_