## City of Driggs

## **Business Registration Renewal Form 2019**

Please complete and return this form along with a \$50 fee to the City of Driggs, P.O. Box 48, Driggs, ID 83422.

I will continue to do business in the City of Driggs in 2019, and need a business registration renewal as required by City Ordinance 272-07. The information I submitted on the original application is complete and unchanged.

	C			
	Yes			
	No (Please make the necessary changes below)			
I have p feet.	plans for constru	action or remodeling is	n 2019 and/or plans for 6	erecting a sign larger than two square
	Yes (Please cor	ntact Justin Mehlhaff	at 208-354-2362)	
	No		, , , , , , , , , , , , , , , , , , ,	
Name of B	business:			
Signature:			Title:	Date:
Please fill	in the below informa	ation if there are changes fron	n the original application.	
Name of B	business:			
Owner of E	Business:			
Number of	f Employees - Full Tim	ıe:	Part Time:	
Address of	Business (or Rental Pr	roperty Address):		
Address of	Landlord:			
Гelephone	Number of Business:_			
Mailing Ad	ddress of Business:			
	feel free to use the tained in the app		y comments, suggestions	or any additional relevant information
FOR OFFICI	E USE:			
Business Reg	gistration #	Date Received:	Receipt No:	Mail Date: