

Business Licensing  
175 East 200 North  
St. George, UT 84770  
435-627-4740

GENERAL BUSINESS LICENSE INFORMATION

This checklist may not be all inclusive, different businesses require different supplemental information. Please call or email if you have questions on what would be required 435-627-4740 or buslic@sgcity.org

- Planning and Zoning approval (Required ONLY if the business is maintaining a physical location in the City of St. George.) Please contact the Planning and Zoning Department to verify if the physical location meets the zoning requirements at 435-627-4206.
- Complete Business License Application and Questionnaire. Only wet signatures will be accepted. **No stamped or copied signatures will be accepted.**
- Fire Inspection (Required ONLY when maintaining a physical location in the City of St. George, not applicable for home occupations) Schedule an appointment for the inspection at 435-627-4153.
- Proof of Fictitious Name Registration (DBA) and copy of Articles of Corporation, Limited Liability, Foreign Corporation, Partnership, or General Partnership filed with the State of Utah Division of Corporations and Commercial Code. File the Fictitious Name at <https://secure.utah.gov/account/log-in.html> 801-530-4849
- Copy of Utah State License for the following: Cosmetologist, Barber, Massage Therapist, Vehicle Dealer, Childcare License, Pest Control, Contractor, Real Estate Broker, etc. For more information regarding state licensing contact the Division of Occupational and Professional Licensing at <https://dopl.utah.gov> or 801-530-6628.
- Sales Tax Number (ONLY if applicable) contact the State Tax Commission at 435-251-9520, located 100 South 5300 West, Hurricane, Utah 84770.
- Southwest Utah Public Health Department approval for Food Establishments, body art permits, Used Oil Recycling, etc. 435-986-2580, located at 620 South 400 East #400, St. George, Utah 84770.
- City of St. George Regional Water Reclamation Facility Permit is required for Food Service Establishments, Waste Haulers, Car Washes, Commercial Truck Washes, Auto Repair, and Industrial Facilities discharging any wastewater. To obtain a permit please contact the Reclamation Facility at 435-627-4284. The permit application is also available at the Business License Department.
- Planning and Zoning approval is required for all signage. Signage is only permitted in commercial locations. Residential locations are not permitted to have commercial signage. For more information regarding signage please visit the City's website: <https://stgeorge.municipal.codes/Code/9-13>. For questions, please call 435-627-4712.
- Other:

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**City of St. George**  
 175 East 200 North – St. George, UT 84770 – (435) 627-4740

**APPLICATION FOR BUSINESS LICENSE**

Conditions of Approval: _____  License Number _____	<b>FOR CITY OFFICE USE ONLY</b> APPROVALS: Required for New Business or Change of Location <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Zoning</td> <td style="width:50%; border-bottom: 1px solid black;">Business LO</td> </tr> <tr> <td style="text-align: right;">/Date</td> <td style="text-align: right;">/Date</td> </tr> <tr> <td style="width:50%; border-bottom: 1px solid black;">Fire Chief</td> <td style="width:50%; border-bottom: 1px solid black;">Other</td> </tr> <tr> <td style="text-align: right;">/Date</td> <td style="text-align: right;">/Date</td> </tr> </table>	Zoning	Business LO	/Date	/Date	Fire Chief	Other	/Date	/Date
Zoning	Business LO								
/Date	/Date								
Fire Chief	Other								
/Date	/Date								

Name of Business \_\_\_\_\_ Business Phone # \_\_\_\_\_

Address at Which Business is Conducted \_\_\_\_\_

Mailing Address \_\_\_\_\_

Business is:  Corporation  Sole Proprietorship  Partnership  Limited Liability Company

Name of Applicant/LLC/Corporation \_\_\_\_\_

Applicant Address \_\_\_\_\_

Contact Name \_\_\_\_\_ Contact Phone # \_\_\_\_\_ Business Email \_\_\_\_\_

**If applicable, please attach a copy of the documents filed with the State of Utah Division of Corporations and Commercial Code**

If Required to be Licensed by State, Check Here  **ALSO ATTACH A COPY OF STATE LICENSE**

Date of Commencing Business in St. George \_\_\_\_\_ Days & Hours of Operation \_\_\_\_\_

Sales Tax Number \_\_\_\_\_ Federal Tax ID \_\_\_\_\_ Type of business to be conducted \_\_\_\_\_

Business Type	Fee	Total
General Business License Fee	\$50.00 (plus employee fees)	
Number of Full-Time Employees	\$10.00 each	
Number of Part-Time Employees	\$5.00 each	
Alcohol License	\$500.00 (no employee fees)	
Tobacco License	\$50.00 (no employee fees)	
Insurance License	Fee waived	
Hotel/Motel	Fee paid by transient room tax	
Non Profit	Fee waived	
Storage Unit Business	\$50.00 plus \$5.00 per unit over 30 units	
Late fee (two months after expiration)	\$25.00	
<b>Total Fees Due</b>	<b>\$350.00 maximum before late fees</b>	

Application completed by (please print) \_\_\_\_\_ Title \_\_\_\_\_

By submitting a signed application, the applicant certifies that the business does not and will not during the licensing period knowingly employ, or subcontract with any entity which employs workers in violation of 8 USC – 1324a. By signing, the applicant acknowledges that the applicant has read, understands, and agrees to comply with the requirements of federal and state law regarding eligibility of workers.

I understand that falsifying any information on this application constitutes sufficient cause for rejection or revocation of my license. I also understand that the City License Office may require additional information as permitted by ordinance, and also agree to supply the same as part of this application. I understand this license will expire on the date indicated on the license and it is my responsibility to renew this License annually without further notification from the City of St. George.

\*Authorized Applicant Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

\*Application must be signed by: a) a corporate officer if the business is a corporation (i.e. a president, corporate secretary-treasurer, or vice president of the corporation, or the manager of one or more manufacturing, production or operation facilities, with authority to sign documents); b) a general partner, member or proprietor if the business is a partnership, limited liability company or proprietorship respectively; or, c) a duly authorized representative (written authorization and written change of authorization must be attached) of the corporation, general partnership, limited liability company or proprietorship.

**BUSINESS LICENSE APPLICATION QUESTIONNAIRE**  
**175 East 200 North, St. George Utah 84770**  
**435-627-4740**

**BUSINESS NAME:** \_\_\_\_\_

**LICENSE NUMBER:** \_\_\_\_\_

1. Will business be conducted at your residence?  YES  NO
2. If business is conducted at your residence will customers or employees come to your residence for business purposes?  YES  NO (if yes your business will be considered a Class B Home Occupation)
3. Will the majority of business be conducted at customer locations?  YES  NO (if yes the business will be considered mobile)
4. Are you required to be licensed by the State of Utah to conduct business?  YES  NO (If yes attach state license. Example: Contractor, Daycare, Human Services, Dentist, Doctor, Lawyer)
5. Are you required to be licensed by the Federal Government to conduct business?  YES  NO (If yes attach federal license. Example: Federal Firearms License)

Please provide a detailed narrative of your proposed business (attach separate sheet if necessary):

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List all partners, members, or officers of partnership, LLC, or corporation:

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