

Town of Superior
PO Box 729
Superior, MT 59872
(406) 822-4672

FOR OFFICIAL USE ONLY

LICENSE # _____

2022

BUSINESS LICENSE – REGISTRATION

NEW

RENEWAL

BUSINESS NAME: _____
Business Physical Address: _____
City, State, Zip: _____
Mailing Address: _____
Business Phone Number (): _____ - _____ Date Business Opened: _____
E-Mail Address: _____
Business Activity: _____

Owners Name: _____
Owner's Address: _____
Owner's Phone Number: _____

Manager's Name: _____
Manager's Address: _____
Emergency Name/Number (after hours): _____

DECLARATION: UNDER THE PENALTY OF PERJURY, I DECLARE THAT I AM THE LEGAL OWNER OF THIS BUSINESS AND ALL INFORMATION PROVIDED IS TRUE AND CORRECT. THIS APPLICATION IS MADE SUBJECT TO ALL THE TERMS AND CONDITIONS OF THE SUPERIOR MUNICIPAL CODE. ALL LICENSES EXPIRE ON DECEMBER 31 OF THE YEAR ISSUED.

Owner's Signature _____

Date _____

HAZARDOUS MATERIALS _____ COMPRESSED GASES _____
ATTACH LIST OF MATERIALS

License Fee:

- \$15.00 Resident-Physical Address of business within Town limits
- \$30.00 Non-Resident Business – Business located outside Town limits
- See Town Code for other categories (Utility Company, Cable, Alcohol, etc.)
- The license fee is Calendar year. If purchased after July 1 the fee is pro-rated.

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___ Approved ___ Denied ___ Resident License ___ Non-resident License

Annual fee: \$ _____ Full ___ Prorate ___

Council Action: ___ Revoke ___ Suspension _____ Date

Reason: _____
___ Re-instate _____ Date of Council Action _____

"This institution is an equal opportunity provider"