



500 South 4th Avenue Brighton, CO 80601  
www.brightonco.gov

## BUSINESS LICENSE APPLICATION BRIGHTON COMMERCIAL BUSINESS

Welcome to the City of Brighton Business Community!

This application packet is for a City of Brighton Business and sales tax license for commercial businesses within the City of Brighton that are not a mobile or outdoor vendor (i.e. food truck, etc.). Please note that, depending on your proposed business activity, additional fees, forms and/or approvals may be required. The current license fee is \$10 which can be paid with a MasterCard or Visa by calling 303-655-2041.

**The following documents are required for commercial businesses:**

- General business license application**
- If license is for an individual/sole proprietor** – affidavit of lawful presence
- Commercial Zoning questionnaire**
- Utility Survey**
- Sales tax addendum**
- Proof of ownership or lease agreement.**
- Floor Plan** – One copy per floor/space your business will occupy (printed or hand-drawn is acceptable)
- If applicable, copy of any required City, State and/or Federal approvals, permits, and/or licenses**

These can include, but are not limited to:

- City of Brighton Contractor’s License – contact the building division for more information
- City of Brighton Conditional Use Permit – contact planning for more information
- Health Department License
- Federal Firearms License

For information on what is and is not allowed in the City of Brighton please contact the planning division.

Incomplete applications will not be accepted. Upon approval of required forms the City’s Finance – Sales Tax Division will email your license and information packet.

### **CONTACT**

#### Sales Tax Division

SalesTax@Brightonco.gov  
303-655-2041

To schedule in-person appointment go to  
Calendly.com/brightonco-tax-licensing

#### Planning Division

klessler@brightonco.gov  
303-655-2059

#### Building Division

lstop@brightonco.gov  
303-655-2017

#### Fire Department

inspections@brightonfire.org  
303-659-4101

#### Utility Survey – Moustapha Agrignan

magrignan@brightonco.gov  
303-655-2284



<b>TAX PREPARER INFORMATION</b> <i>If Applicable</i>			
Tax Preparer Name:			
Tax Preparer E-mail:		Tax Preparer Phone #:	
Tax Preparer Address:	City	State	Zip

<b>FOR COMMERCIAL AND HOME BUSINESSES WITHIN THE BRIGHTON CITY LIMITS</b>			
Property Owner Name:			
Property Owner E-mail:		Property Owner Phone #:	
Property Owner Address:	City	State	Zip

<b>OWNERS/OFFICERS Confidential Information</b>			
Name:	Title	Phone #:	
Address	City	State	Zip
Name:	Title	Phone #:	
Address	City	State	Zip
Name	Title	Phone #:	
Address	City	State	Zip

<b>AFFIRMATION AND SIGNATURE</b>			
<p><i>I declare, under the penalty of perjury in the second degree, and by signature affixed hereto, that this application is complete and accurate to the best of my knowledge and belief, and that the statements made herein are made in good faith pursuant to the Colorado tax laws and regulations. I understand that it is my responsibility to operate my business in compliance with the City of Brighton's Land Use and Development Code and the Municipal Code. I understand that non-compliance is grounds for revocation of my license.</i></p>			
Signature of Owner/Officer or Authorized Rep	Printed Name	Title	Date



This **certificate of compliance or completion** becomes part of the Business License Application Submittal. An inspection of the location may be required. For questions on this form and/or inspection requirements please contact the City's Building Division at 303-655-2017 or [lstop@brightonco.gov](mailto:lstop@brightonco.gov)

- Check all that apply:
- |  |  |
|--|--|
| <input type="checkbox"/> Construction of new building    | <input type="checkbox"/> Renovation to existing building |
| <input type="checkbox"/> Change of ownership of building | <input type="checkbox"/> Change of ownership of business |
| <input type="checkbox"/> Change of use in building       | <input type="checkbox"/> Other: _____                    |

Name of business: \_\_\_\_\_ Business phone #: \_\_\_\_\_

Address of Building / Business: \_\_\_\_\_ Unit #: \_\_\_\_\_

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

Local Contact Name: \_\_\_\_\_

Local Contact e-mail: \_\_\_\_\_ Local contact phone #: \_\_\_\_\_

- |  |            |           |
|--|------------|-----------|
| Is the building a new construction?                                | <b>YES</b> | <b>NO</b> |
| Will there be any changes to the floor plan of the building?       | <b>YES</b> | <b>NO</b> |
| Will there be any change to the electrical system?                 | <b>YES</b> | <b>NO</b> |
| Will there be any changes to the plumbing system?                  | <b>YES</b> | <b>NO</b> |
| Will there be any changes to the heating or cooling system?        | <b>YES</b> | <b>NO</b> |
| Is the building equipped with a fire sprinkler system?             | <b>YES</b> | <b>NO</b> |
| Is the building equipped with a fire alarm system?                 | <b>YES</b> | <b>NO</b> |
| Will there be any changes to the fire sprinkler or alarm systems?  | <b>YES</b> | <b>NO</b> |
| Will the business require use of hazardous chemicals or processes? | <b>YES</b> | <b>NO</b> |

What is the principal use of the space you will occupy? \_\_\_\_\_

What was the previous use of the space you will occupy? \_\_\_\_\_

I hereby attest that the information stated above is true and correct to the best of my knowledge and that I am the owner or legal representative of the owner of the proposed business. I understand that it is my responsibility to operate my business in compliance with the City of Brighton's Land Use and Development Code and the Municipal Code. I understand that non-compliance is grounds for revocation of my license.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant E-mail

\_\_\_\_\_  
Applicant Phone #:

**FOR OFFICIAL USE ONLY**

Building Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Fire Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

This **commercial zoning questionnaire** becomes part of the Business License Application Submittal. An inspection of the location may be required. For questions on this form and/or inspection requirements please contact the City's Planning Division at 303-655-2059.

Name of business: \_\_\_\_\_

Address of Building / Business: \_\_\_\_\_ Unit #: \_\_\_\_\_

1. Describe the type of business activity \_\_\_\_\_

2. Is this business activity a new use for the location? **YES** **NO**  
 If yes what was the previous business activity for the location?  
 \_\_\_\_\_

3. How many parking spaces are currently provided on-site for your use? \_\_\_\_\_

4. Will the business include any age-restricted activities? (alcohol, tobacco, etc.) **YES** **NO**  
 If yes please describe \_\_\_\_\_

5. Will there be any changes to the site such as landscaping, parking access, trash collection, fencing or outdoor storage? If yes, please describe **YES** **NO**  
 \_\_\_\_\_

6. Will there be any changes to the outside of the building such as repainting, re-facing the exterior, roofing/windows or additions? If yes, please describe **YES** **NO**  
 \_\_\_\_\_

7. What is the floor area of the existing building? \_\_\_\_\_

8. What is the floor area of the proposed / new building (if applicable)? \_\_\_\_\_

9. Will there be animals on the property as part of the business? **YES** **NO**

*I hereby attest that the information stated in this addendum is true and correct to the best of my knowledge. I understand that it is my responsibility to operate my business in compliance with the City of Brighton's Land Use and Development Code and the Municipal Code. I understand that non-compliance is grounds for revocation of my license.*

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

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Applicant E-mail

\_\_\_\_\_  
 Applicant Phone #:

**FOR OFFICIAL USE ONLY**

Planning Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

If yes on question 9,  
 Code Enforcement Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

# COMMERCIAL BUSINESS DEVICE REQUIREMENTS

All required devices will have a check mark next to the business category.  
Every business is required to have a backflow device.

	HAIR CATCHER	GREASE INTERCEPTOR	GREASE TRAP	SAND/OIL SEPERATOR	AMALGAM SEPERATOR	PAINT SEPERATOR	DISTALLATION UNIT	NEUTRALIZATION TANKS	EVAPORATOR/CLARIFIER	BACKFLOW DEVICE
DRY CLEANERS								✓		✓
CAR WASH				✓						✓
RESTAURANTS		✓	✓							✓
BARBER SHOPS	✓									✓
BEAUTY SALONS	✓									✓
AUTO REPAIR SHOPS			✓	✓						✓
FUNERAL PARLORS					✓			✓		✓
MEDICAL OFFICES INCLUDING DENTAL					✓					✓
CONTRACTORS		✓	✓	✓		✓				✓
INDUSTRIAL	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

To avoid delays, tenants should check with the property owner to verify the required devices are in place before submitting their license application.

For questions and more information specific to these required devices, please contact  
Moustapha Agrignan, Utilities Staff Engineer  
at 303-655-2284 or [magrignan@brightonco.gov](mailto:magrignan@brightonco.gov)





This **sales tax addendum** becomes part of the Business License Application Submittal. Per the *Brighton Municipal Code Sec. 3-28-85 – Proof of exemption; responsibilities of taxpayers; licenses* City tax shall be remitted on the price paid for tangible personal property acquired with the purchase of a business and for use in the operation of such business.

Name of business: \_\_\_\_\_

Address of Building / Business: \_\_\_\_\_ Unit #: \_\_\_\_\_

If purchasing an existing city business:

Name of Business Purchased \_\_\_\_\_

Name of former owner \_\_\_\_\_

Former owner e-mail \_\_\_\_\_

Former owner phone #: \_\_\_\_\_

Please check one. I certify the following regarding fixed assets (i.e. furniture, machinery, equipment, etc.)

- I am NOT purchasing an existing city business – sales tax on fixed assets not due at this time
- I am purchasing an existing city business and the purchase did NOT include fixed assets. I am enclosing proof that fixed assets were not included in purchase of the business.
- I am purchasing an existing city business. The purchase included fixed assets *and* the seller charged tax on the price or value of the fixed assets.

I am enclosing proof that City of Brighton tax was charged on the price of the fixed assets as part of the purchase. (Note documentation must separately show the sale price and sales tax charged.)

- I am purchasing an existing city business. The purchase included fixed assets *and* the seller did not charge City of Brighton sales tax on the price or value of fixed assets. I am enclosing sales tax payment for the fixed assets

Value of fixed Assets: \_\_\_\_\_

City of Brighton Tax at 3.75%: \_\_\_\_\_

*I hereby attest that the information stated in this addendum is true and correct to the best of my knowledge. I understand that is my responsibility to operate my business in compliance with the City of Brighton's Land Use and Development Code and the Municipal Code. I understand that non-compliance is grounds for revocation of my license.*

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

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant E-mail

\_\_\_\_\_  
Applicant Phone #:

Please make checks payable to City of Brighton and return to

City of Brighton  
Attn: Sales Tax Division  
500 S 4<sup>th</sup> Ave  
Brighton CO, 80601.



500 South 4th Avenue Brighton, CO 80601  
www.brightonco.gov

## AFFIDAVIT OF LAWFUL PRESENCE FOR “NATURAL PERSONS” OR SOLE PROPRIETORS

Colorado law requires the verification that all natural persons 18 years or older or sole proprietors who are applying for a public benefit are lawfully present in the United States prior to receiving the public benefit. A public benefit includes the application or renewal of a grant, loan, contract, and professional or commercial license provided by an agency of the state or local government.

I, \_\_\_\_\_ swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

- I am a United States citizen, or
- I am a Permanent Resident of the United States; or
- I am lawfully present in the United States pursuant to Federal law

I understand that this sworn statement is required by law because I have applied for a “public benefit.”

I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit.

I acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the laws of Colorado.

I have attached a copy of one of the acceptable documents provided by the State of Colorado and I presented it to the agency as proof of identification that I am at least 18 years of age and I am lawfully in the United States.

\_\_\_\_\_  
Printed Name of Applicant/Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

### Acceptable documentation includes

- Colorado Driver License, Colorado Driver Permit or Colorado Identification Card valid for federal identification, voting or public benefit purposes, expired one year or less
- Out of state Driver License or photo identification card valid for federal identification, voting or public benefit purposes, expired one year or less
- US Passport expired less than 10 years
- Valid foreign passport with I-94 or valid processed for I551 stamps
- Valid I551 Permanent Resident Card
- Valid I688 Temporary Resident, I688B, and I766 Employment Authorization Card with intact photo
- Valid US Military ID
- Tribal identification card with intact photo
- Certificate of Naturalization with intact photo
- Certificate of US Citizenship with intact photo