BUSINESS REGISTRATION RENEWALS ARE TO BE FILED ON OR BEFORE MARCH 15TH OF EACH YEAR (FEE DUE JANUARY 1ST, AFTER MARCH 15TH A DELINQUENT FEE OF $5.00 WILL BE ASSESSED)

A SEPARATE BUSINESS REGISTRATION APPLICATION FORM MUST BE COMPLETED FOR EACH BUSINESS. A SEPARATE BUSINESS REGISTRATION FORM SHOULD NOT BE COMPLETED FOR EACH LOCATION OF A SINGLE BUSINESS.

( ) INITIAL APPLICATION    ( ) RENEWAL APPLICATION

1. NAME AND ADDRESS OF APPLICANT: ______________________________________
________________________________________________________________________

2. NAME OF BUSINESS: _____________________________________________________

3. DOING BUSINESS AS: _____________________________________________________

4. STREET ADDRESS OF BUSINESS: __________________________________________

5. MAILING ADDRESS OF BUSINESS: _________________________________________
________________________________________________________________________

6. TELEPHONE NO. _________________________________________________________

7. APPLICANT IS:  INDIVIDUAL ___  PARTNERSHIP ___  CORPORATION ___

A. For individual – name and address of owner: _________________________________
________________________________________________________________________

B. For partnership – names and addresses of owners: ____________________________
________________________________________________________________________
________________________________________________________________________

C. For corporation – names and addresses of Officers:

    President: __________________________________________________________________
    Vice-President: __________________________________________________________________
    Secretary: __________________________________________________________________
    Treasurer: __________________________________________________________________
8. PLEASE DESCRIBE IN DETAIL, THE NATURE OF THE BUSINESS:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

9. NEW MEXICO TAXATION AND REVENUE DEPARTMENT CRS NUMBER:

______________________________

10. FEDERAL EMPLOYER TAX NUMBER: (If applicable) ____________________________

11. PLEASE PROVIDE COPIES OF NEW MEXICO STATE LICENSE(S), STATE CORPORATION COMMISSION NUMBERS, STATE OF INCORPORATION DOCUMENTS AND ALL APPLICABLE PERMITS. MUST BE ATTACHED HERETO.

12. BUSINESS REGISTRATION FEES ARE NOT PRORATED AND ARE NON-TRANSFERABLE. APPLICATION FOR BUSINESS REGISTRATION MUST BE MADE PRIOR TO THE OPENING OF THE BUSINESS.

The applicant is responsible for ensuring that his/her business complies with all relevant Federal, State and Local Regulations. Issuance of this Business Registration does not imply that such requirements have been met. Applicants hereby affirm that the statements and information on this application are true and correct to the best of his/her knowledge, information and belief.

SIGNED: _________________________  DATE: _________________________

DO NOT WRITE IN THIS SPACE, FOR ADMINISTRATIVE USE ONLY:

AMOUNT OF BUSINESS REGISTRATION FEE: $35.00
RECEIVED BY: ________________________________
RECEIPT NUMBER: ______________________________
DATE PAID: ________________________________