



# Business Registration

City Clerk  
4800 West 92nd Avenue  
Westminster, CO 80031

(303) 658-2162  
FAX (303) 706-3924  
[licensing@cityofwestminster.us](mailto:licensing@cityofwestminster.us)  
[www.CityofWestminster.us](http://www.CityofWestminster.us)

**In order to ensure legibility, please fill in fields using PDF reader. Incomplete registrations will be returned.**

<b>PART A - Registrant Information</b>	1) Legal/True Name of Business (Last, First if Individual). Repeat on Page 2			<b>CITY USE ONLY</b>	
	2) Trade Name (DBA) of Business (if any up to 30 characters)			Acct	LT
	3) Federal Employer ID			4) Colorado Sales Tax Account	
	5) Other Westminster Accounts			l. Class	Area
	6) Reason for Filing (check only one) <input type="checkbox"/> <b>New Registration (Including registration of new location)</b> <input type="checkbox"/> Update Information for Account: _____ <input type="checkbox"/> Business Purchased or Merged <input type="checkbox"/> Change in Legal Form			7) Legal Form (check only one): <input type="checkbox"/> Individual/Sole Proprietor (81) ( <a href="#">Verification of Lawful Presence</a> required) <input type="checkbox"/> Corporation (Including PC) (83) <input type="checkbox"/> Limited Liability Company (LLC) (84) <input type="checkbox"/> Partnership (General or Limited) (82) <input type="checkbox"/> Limited Liability Partnership (LLP or LLLP) (89) <input type="checkbox"/> Non-Profit (85) <input type="checkbox"/> Trust (87) <input type="checkbox"/> Government (88) <input type="checkbox"/> Other Entity Type (80): _____	
	8) Location/Account Type (check only one): <input type="checkbox"/> Commercial (Including retail, office, and industrial locations) <input type="checkbox"/> Home Occupation ( <a href="#">additional registration form</a> required) <input type="checkbox"/> <b>Out of City Location(s) (proceed to line 17)</b> <input type="checkbox"/> Catalogue or Internet Sales Account (proceed to line 17)				
<b>PART B - Address &amp; Contact Information</b>	<b>Location Information</b>				
	Out of City, Catalogue, and Internet accounts proceed to line 17				
	9) Location Manager Name		10) Location ID	11) Location Phone Number	
	12) Location Street Address with Suite Number (No PO Boxes)				
	13) City	14) State	15) Zip Code	16) Economic Development E-mail Address	
	<b>Business Registration and Licensing Information</b>				
	17) Send <b>Business Licensing</b> Correspondence Care Of		18) Licensing Phone Number	19) Licensing Fax Number	
	20) Check the following if the licensing address is: <input type="checkbox"/> Same as Location Address (lines 12 - 15 above)		21) Mailing Address for <b>Business Licensing</b> Correspondence		
			22) City	23) State	24) Zip Code
	<b>Tax Compliance Information</b>				
	25) Send <b>Tax</b> Correspondence Care Of		26) Tax Phone Number	27) Tax Fax Number	
	28) Check one of the following if the tax address is: <input type="checkbox"/> Same as Location Address (lines 12 - 15 above) <input type="checkbox"/> Same as Licensing Address (lines 21 - 24 above)		29) Mailing Address for <b>Tax</b> Forms, Notices, and Correspondence		
		30) City	31) State	32) Zip Code	
33) Check one of the following if the records address is: <input type="checkbox"/> Same as Location Address (lines 12 - 15 above) <input type="checkbox"/> Same as Licensing Address (lines 21 - 24 above) <input type="checkbox"/> Same as Tax Address (lines 29 - 32 above)		34) Address where Tax Records may be Inspected (No PO Boxes)			
		35) City	36) State	37) Zip Code	
Tax Contact E-mail Address					
Primary E-mail Address:					
Alternate E-mail Address:					

**This form has 2 pages. Both pages must be completed. Incomplete registrations will be returned.**

38) Legal/True Name of Business (From Part A, Line 1)
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<b>PART C - Officers</b>	39) Name of principal officer, owner, partner, member, or manager		40) Title				
	41) Address of principal residence		42) City				
	43) State		44) Zip Code				
	45) Name of other officer, owner, partner, member, or manager		46) Title				
47) Address of principal residence		48) City		49) State		50) Zip Code	
Additional officers, owners, partners, members, or managers may be included on attachments.							

51) Legal Name of Prior Registrant (if purchased or merged)		52) Prior FEIN (if available)	53) Purchase/Merge Date
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54) <b>Start Date in Westminster</b>	<b>Local businesses must file an Initial Use Tax Return by the 20th of the following month. Notify the Sales Tax Division at (303) 658-2065 of changes to this date.</b>
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55) Hours of Operation (local businesses only)							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

56) Internet Address http://		<input type="checkbox"/> 57) Home occupations: Check this box to be listed in the City website Business Directory.	Number of Employees at this Location 58) FT      59) PT	
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60) Primary Business Type (check only one)		
<input type="checkbox"/> Retail (10)	<input type="checkbox"/> Manufacturing or Processing (30)	<input type="checkbox"/> Financial Institution (45)
<input type="checkbox"/> Wholesale (20)	<input type="checkbox"/> Professional or Service (40)	<input type="checkbox"/> Leasing (50)
<input type="checkbox"/> Hospitality or Entertainment (15)	<input type="checkbox"/> Construction (35)	<input type="checkbox"/> Government/Non-Profit (70)

61) Description of Goods Sold or Services Provided (Up to 30 Characters)		<input type="checkbox"/> 62) Check this box if you intend to sell liquor.	63) State Child Care License Number
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64) Requested Reporting Frequency	
<input type="checkbox"/> Monthly (Annual tax liability over \$500) (12 89 FM)	
<input type="checkbox"/> Quarterly (Annual tax liability from \$150 to \$500) (04 90 FQ)	
<input type="checkbox"/> Annually (Annual tax liability under \$150) (01 92)	
<b>Every business must file at least annually, even if no tax is due.</b>	
All businesses, including those that do not make taxable sales, will likely have a use tax liability.	

<b>PART E - Emergency Contacts</b>	<b>Local businesses complete this part. Home occupations and out of city businesses need not complete this part.</b>		
	This information is provided to the Westminster Police Communications Center. In case of a police or fire emergency, a local responsible person will be contacted to file a report and take charge of the premises.		
	67) Primary After Hours Emergency Contact Name	68) Title	69) After Hours Phone Number
	70) Secondary After Hours Emergency Contact Name	71) Title	72) After Hours Phone Number
	73) Third After Hours Emergency Contact Name (optional)	74) Title	75) After Hours Phone Number

<p><b>Signature of Registrant or Authorized Agent</b></p>	Under penalties of perjury, I declare that I have examined this Business Registration and it is true and correct to the best of my knowledge & belief.	
	Printed Name	
	Title	

# Instructions for Business Registration

## General Instructions

**Purpose of Form.** This form is used for persons engaged in business in the City of Westminster to register with the City and obtain the appropriate licenses.

Every person engaged in business in the City must hold the appropriate licenses. Some businesses are required to register even though they do not maintain a fixed commercial location within the City.

There is no fee for general business licenses, home occupation licenses, and sales & use tax licenses. Certain types of businesses will be required to complete supplemental registrations and pay the appropriate fees.

**Submission.** Complete all required line items and submit to:

City of Westminster  
City Clerk  
4800 W 92<sup>nd</sup> Avenue  
Westminster, CO 80031-6387

Completed forms may also be submitted via facsimile or e-mail to: (303) 706-3924 or [licensing@cityofwestminster.us](mailto:licensing@cityofwestminster.us).

**Adobe PDF Fill-In.** In order to improve legibility, the City has enabled this form to be completed using the Adobe Reader. This product can be downloaded at no charge from the Adobe website (<http://www.adobe.com>).

Registrants choosing not to complete the form using Adobe Reader must typewrite the form. Illegible forms will be returned without processing.



*Data entered into form fields using Adobe Reader will not be transmitted to the City and cannot be saved. Once complete, the registration must be printed, signed, and submitted as described above. Retain a photocopy of the completed registration for your records.*

**Review and Approval.** Business registrations are reviewed by a variety of City departments to ensure compliance with building, land use, taxation, and other laws and regulations. This review process takes approximately three to four weeks. It is unlawful for any person to engage in business in the City without first obtaining the appropriate licenses.

It is important to submit the registration allowing sufficient time for review and approval prior to the start of business. Please review the registration for legibility, errors, and omissions which also may delay the time necessary to receive a license.

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## Additional Reminders & Resources

**This is a legal document.** Read all instructions carefully to ensure this registration is accurate and complete. Licenses to conduct business in the City may be denied, suspended, or revoked if the information contained in this registration is incomplete or contains false, misleading, or fraudulent statements.

**Signature required.** The person completing the registration must sign and date the form at the bottom. A printed name is

also required. If the registrant is not a natural person, the title of the officer or agent completing the form on behalf of the registrant must also be printed on the form. Forms without a signature will be returned.

**Keep information updated.** The information in this Business Registration is used by a variety of City agencies including the City Clerk, Police, Fire, Code Enforcement, Planning, Building, Sales Tax and Economic Development for health, public safety, land use, and other regulatory and informational concerns. It is critical that you report any changes in this information to the office of the City Clerk as soon as practicable. Please reference your assigned Westminster account number on any correspondence.

**Westminster taxes.** The Sales Tax Division collects Westminster taxes. For forms, *Tax Compliance Guide* publications on a variety of topics, and other resources, visit the [Tax/License Toolbox](#) section of the City website: <http://www.CityofWestminster.us> or call (303) 658-2065.

**Trade name registration.** An individual or entity transacting business in the state of Colorado under a name other than their legal or true name must register such trade name (also referred to as a “doing business as” or “DBA”) with the Colorado Secretary of State. Additional information is available at <http://www.sos.state.co.us>.

**State tax registration.** In addition to registering with the City of Westminster, businesses must register with the Colorado Department of Revenue and may be required to register with other home rule cities. Additional information is available on the department’s website: <http://www.taxcolorado.com> or by contacting the Taxpayer Services Division at (303) 238-7378. The department publishes a directory of home rule municipalities (publication number DR 1002) which is also available on their website.

**Business signs.** Businesses are required to obtain a permit from the City before erecting or maintaining a temporary or permanent sign. Sign regulations are contained in Title XI, Chapter 11 of the [Westminster Municipal Code](#). Contact the Department of Community Development at (303) 658-2114 for additional information.

**County taxes and information.** Westminster is located within Jefferson county (west of Sheridan Boulevard) and Adams county (east of Sheridan Boulevard). Property taxes are collected by the county in which property is located. For information on county resources and property taxes contact:

Adams County: (303) 659-2120  
Jefferson County: (303) 279-6511

**Food service businesses.** Food service businesses are required to obtain a permit from the health department. For more information contact:

Tri-County Health (Adams): (303) 220-9200  
Jefferson County Health: (303) 232-6301

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## Specific Instructions

**Line 1 – Legal/True Name of Business.** Enter the legal name of the individual or entity registering exactly as it appears on the registrant’s social security card, charter,

articles of organization, or other legal document. This is not normally the name of the individual completing this form.

**Individuals/Sole Proprietors:** Enter your last name followed by your first name as it appears on your social security card.

**Corporations:** Enter the name of the corporation as it appears in the articles of incorporation or corporate charter.

**Limited Liability Company:** Enter the name of the LLC as it appears in the articles of organization.

**Partnerships:** Enter the name of the partnership as it appears in the partnership agreement.

**Trusts:** Enter the name of the trust as it appears in the trust instrument.

**Line 2 – Trade Name.** Enter the name by which the registrant is known to the public if it is different than the legal name. Trade names are also referred to as “doing-business-as” or “DBA” names and must be registered with the Secretary of State (see above). If the trade name exceeds 30 characters, abbreviate it appropriately.

If the registrant is known by multiple trade names, enter the most common name (i.e. the name which will appear on business invoices and signage) and attach a sheet listing the additional trade names.



*It is particularly important that local businesses list the name displayed on premise signage so that police and fire personnel can easily locate the business in case of an emergency.*

**Line 3 – Federal Employer Identification Number.** Enter the registrant’s nine digit Federal Employer Identification Number (EIN).

If the registrant is an individual or a single member disregarded LLC without an EIN, do not enter your social security number (or taxpayer identification number). Leave this line blank.

If the registrant has applied for an EIN, leave this line blank and file an update upon receiving the EIN from the Internal Revenue Service. For additional information on applying for an EIN visit, the IRS website: <http://www.irs.gov>.

**Line 4 – Colorado Sales Tax Account.** If applicable, enter the retail sales tax or retailers use tax account number issued to the registrant by the Colorado Department of Revenue. If the registrant has applied for a state sales tax account, leave this line blank and file an update upon receiving an account number from the Department of Revenue. For additional information on registering with the Department of Revenue, visit their website: <http://www.taxcolorado.com>.



*Do not list an EIN or state sales tax account number on tax returns, forms, and other correspondence with the City. Upon approval of the registration, the City will issue a unique seven digit Westminster tax account number.*

**Line 5 – Other Westminster Tax Accounts.** Each location within the City requires a separate license.

Sales made from locations outside Westminster, catalogue sales, and sales over the internet can be reported under a single account that is separate from accounts for locations in

the City. Taxpayers cannot add these sales to an account for a location in the City.

Provide any account numbers under which this registrant is registered with the City. In general, the first five digits of the new account number will remain the same with a unique number assigned for the last two digits. Do not list account numbers assigned to other individuals or entities related to the registrant even though they may share the same trade name.

**Line 6 – Reason for Filing.** Check the box which best represents the reason you are submitting this registration. Note that business licenses are generally not transferrable, and that a new registration will be required if the business is sold or merged into another entity.

**Line 7 – Legal Form.** Check the box next to the appropriate legal form. If the registrant’s legal form is not listed, check the “other entity type” box and provide a description of the organization’s legal form.



*Pursuant to C.R.S. § 24-76.5-103, individuals and sole proprietorships are required to submit a [Verification of Lawful Presence](#) form in addition to this business registration. This form is available in the Tax/License Toolbox section of the City website under Licenses. Out of City and catalogue and Internet only accounts do not need to complete this form.*

**Line 8 – Location/Account Type.** Check the box which best describes the location for which a license is sought.

**Commercial** locations include all premises within the City (except residential dwellings) where any kind of trade, vocation, occupation, profession, enterprise, establishment, or other activity or matter, whether or not for profit, is operated, excluding those activities operated from a residential address. For licensing purposes, commercial locations include licenses for businesses operating and maintaining hotels/motels, multi-family dwellings, and residential care facilities.

**Home Occupations** include those activities operated in connection with the occupation of a dwelling unit (residence) in accordance with the City zoning code. Special restrictions apply to residential locations and a supplemental [Home Occupation Registration](#) form is required to be submitted with this business registration.

**Out of City** accounts are for registrants engaged in business in the City who do not maintain a fixed premise in the City. Out of city accounts are also for registrants with one or more locations in the City to report sales of property and services originating from location outside Westminster. Sales from multiple locations outside Westminster may be combined under a single out of city account, however, taxpayers may not report out of city sales using an existing commercial account.

**Catalogue and Internet** accounts are similar to out of city accounts. They are used for registrants who are required or desire, for the convenience of their customers, to collect tax on sales made through catalogues or via the Internet. Such sales may not be reported using an existing commercial account, however, businesses in the City with an account for out of City locations need not establish a separate catalogue and Internet account. Home occupations are not required to establish separate accounts for Internet sales.

**Out of City, catalogue, and Internet accounts do not need to complete lines 9 through 16. Proceed to line 17.**

**Line 9 – Location Manager Name.** Enter the name of the person responsible for the management and supervision of activities carried on in the City.

**Line 10 – Location Identification.** Businesses with multiple locations often assign each location a unique identification number or code. If you refer to this location by such a code, enter it on this line 10.

**Line 11 – Location Phone Number.** Enter the local phone number, including area code, of the location for which a license is sought.

**Lines 12 through 15 – Location Address.** Enter the street address of the location for which a license is sought. Include the suite, space, or unit number if applicable. Do not enter a post office box. Enter the city, state, and zip code. Zip+4 entries are permitted.

**Line 16 – Economic Development E-mail Address.** Enter a valid e-mail address to receive important news and information on City programs and events from the City's Economic Development office.

**Line 17 – Business Licensing Contact.** Enter the name of the individual or department to which correspondence regarding business registration and licensing should be directed. Such correspondence includes without limitation, licenses, renewal notices, and notices of adverse action.

**Line 18 – Business Licensing Phone Number.** Enter the phone number of the individual or department handling business registration and licensing inquiries.

**Line 19 – Business Licensing Fax Number.** Enter the facsimile number upon which correspondence regarding business registration and licensing is received.

**Line 20 – Duplicate Address.** If the address for business registration and licensing correspondence is the same as the location address listed on lines 12 through 15, check the box on this line 20 and proceed to line 25. Otherwise, complete lines 21 through 24.

**Lines 21 through 24 – Business Licensing Address.** Enter the mailing address of the individual or department to which correspondence regarding business registration and licensing should be directed. Post office boxes are permitted on this line. Enter the city, state, and zip code. Zip+4 entries are permitted.

**Line 25 – Tax Compliance Contact.** Enter the name of the individual or department to which correspondence regarding Westminster taxes should be directed. Such correspondence includes without limitation, tax returns, forms, notices of assessment, and audit notices.

**Line 26 – Tax Compliance Phone Number.** Enter the phone number of the individual or department handling tax inquiries.

**Line 27 – Tax Compliance Fax Number.** Enter the facsimile number upon which correspondence regarding taxes is received.

**Line 28 – Duplicate Address.** If the address for tax correspondence is the same as the location address or the business licensing address, check the appropriate box on this line 28 and proceed to line 34. Otherwise, complete lines 29 through 32.

**Lines 29 through 32 – Tax Compliance Address.** Enter the mailing address of the individual or department to which correspondence regarding Westminster taxes should be directed. Post office boxes are permitted on this line. Enter the city, state, and zip code. Zip+4 entries are permitted.



*The Westminster Municipal Code requires that every person engaged in business in the City keep and preserve records suitable in content and form to allow the City to determine such person's tax liability. Audits are often conducted at the location where books and records are maintained, but may also be conducted at City offices.*

**Line 33 – Duplicate Address.** If the address where tax records are maintained is the same as the location address, the business licensing address, or the tax address, check the appropriate box on this line 33 and proceed to line 38. Otherwise, complete lines 34 through 37.



*A street address where tax records are maintained is required. Do not check a duplicate address box if you entered a post office box for the business licensing or tax address. Complete lines 31 through 34.*

**Lines 34 through 37 – Tax Records Address.** Enter the street address where tax records are maintained. Do not enter a post office box. Enter the city, state, and zip code. Zip+4 entries are permitted.

**Line 38 – Legal Name of Registrant.** In order to prevent the second page from being misplaced, enter the legal name of the registrant as it appears on line 1 of the first page.

**Lines 39 through 50 – Owner, Officer, Partner, Manager, or Member Information.** Enter the name, title, e-mail address, home street address, city, state and zip code of each owner, officer, partner, LLC manager, or principle LLC member. Do not enter a post office box. Do not enter the principle office or location address unless the registrant is a home occupation.

If there are more than two individuals, attach an additional, typewritten sheet listing the legal name of the registrant (from line 1) and containing all of the required information. Use only white, 8½" x 11" paper. Duplex printing is permitted.

**Lines 51 through 53 – Prior Registrant.** If this registration was caused by the purchase of an existing business, a merger, or a change in legal form, enter the name and Federal Employer Identification Number (if known) of the previous registrant. Enter the effective date of the purchase, merger, or change on line 53. The account of the previous registrant will be closed and a final tax return will be required.



*In certain circumstances, a new owner may be liable for taxes owed by a previous owner. For more information, see Tax Compliance Guide topic 357 regarding business purchases.*

**Line 54 – Start Date in Westminster.** Enter the date business commenced or will commence in the City. All registrants must enter a date. If you are unsure of the exact date, enter a date which best represents your anticipated start date and contact the Sales Tax Division at (303) 658-2065 if this date changes.

This date may be in the past if the registrant has been operating without a license. Prior period tax returns may be required.

**New businesses in the City** should list the opening date excluding prior construction and setup time. An initial use tax return is due on the 20<sup>th</sup> of the month following this date.

**Out of City businesses** should list the date of the first sale or contact within the City.

**Line 55 – Hours of Operation.** Certain types of businesses are allowed to operate only during specific times. Enter the proposed hours of operation for your business for each day of the week. If your business will not operate on certain days, enter “CLOSED” in the top “From” field under those days. Refer to Title V of the *Westminster Municipal Code* for additional information.

**Line 56 – Internet Address.** Commercial businesses within the City are listed in the business directory on the City website. The Internet address on this line 56 will be included in this listing if provided. Registrants need not list the “http://” portion of the address, but must include the “www” if applicable.

**Line 57 – Home Occupation Business Directory Listing.** Home occupations must opt-in to be included in the business directory on the City website. Check the box on this line 57 to opt in. Note that your home address will be included on the listing for your business. If you listed an Internet address on line 56, it will also be included.

**Line 58 – Full Time Employees.** Local businesses enter the number of employees working 32 or more hours per week at the location listed on lines 12 through 15. Out of City businesses should skip this line.

**Line 59 – Part Time Employees.** Local businesses enter the number of employees working fewer than 32 hours per week at the location listed on lines 12 through 15. Out of City businesses should skip this line.

**Line 60 – Primary Business Type.** Check the box which best describes the primary type of business to be conducted under this license. The type selected will be displayed in the business directory on the City website. If multiple types are applicable, choose the type which, in your opinion, best represents the primary business type. Check only one box.

**Line 61 – Description of Goods Sold or Services Provided.** Enter a brief (up to 30 characters including spaces) description of the goods sold and/or services provided. This description will appear in the business directory on the City website.

Along with the primary business type, this description will be used to evaluate this registrant’s proposed use for public safety and land use compliance. This description will also aid the City Clerk in assigning a class code from the North

American Industry Classification System (NAICS). Be as specific as possible in 30 characters.

**Line 62 – Liquor Sales.** Check the box on this line 62 if the registrant proposes to sell liquor now or in the future. This line will aid the Planning Division in evaluating the location for zoning and land use restrictions. Contact the City Clerk for additional information on liquor licensing.

**Line 63 – State Child Care License Number.** Child care providers are required to obtain a license from the Colorado Department of Human Services (CDHS) prior to registering with the City. If the registrant will be providing child care services, enter the State license number on this line 63. For more information, contact CDHS at (303) 866-5958.

**Line 64 – Requested Reporting Frequency.** Every person engaged in business in the City must file a tax return annually even if no tax is due. Even service businesses that do not make taxable sales will likely have a use tax liability. For additional information on use tax, refer to *Tax Compliance Guide* topic 313.

Professional services and home occupations will usually be assigned an annual frequency. Depending upon the nature of the business and the average tax liability, some businesses will be required to file more frequently. Check the box representing your requested filing frequency.



*If your business is occasional, making only one or two sales in the City per year in excess of \$1,000, select an annual filing frequency to avoid filing zero liability returns monthly.*

**Lines 65 through 66 – Information is no longer required.**

**Lines 67 through 75 – Emergency Contact Information.** Local businesses, enter the name, title, and after hours phone number of up to three local emergency contacts. This information is used by the Westminster Police Communications Center in case of a police or fire emergency.

The persons on this list must be able to report to the business, make police reports, take charge of and/or secure the premises. Given the critical nature of this information, it is important that it is kept current. Report any changes immediately to the City Clerk.

**Signature –** After reviewing the registration for accuracy and completeness, sign the form on the lower portion of the second page. Print the name and title of the person who completed the return and the date it was completed.