



City of Monte Vista  
4 Chico Camino (719) 852-5926 Fax: (719) 852-6172  
Monte Vista, CO 81144

**RETAIL SALES TAX LICENSE APPLICATION - \$10.00 FEE**

Current State of Colorado Retail Sales Tax License No.: \_\_\_\_\_  
(Attach a copy of your Sales Tax License issued by the State of Colorado)

1. Name of Owner(s): \_\_\_\_\_
2. Address of Owner(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. Business Name: \_\_\_\_\_  
\_\_\_\_\_
4. Business Location: \_\_\_\_\_  
\_\_\_\_\_
5. Mailing Address: \_\_\_\_\_
6. City, Zip Code \_\_\_\_\_
7. Type of Business: \_\_\_\_\_
8. Signature(s): \_\_\_\_\_  
\_\_\_\_\_

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**Office Use Only**

|                      |                      |
|----------------------|----------------------|
| Account No.: _____   |                      |
|                      |                      |
| Renewal: Yes No      |                      |
|                      |                      |
| Date Received: _____ | Fee Submitted: _____ |

Approval of the Clerks Office: \_\_\_\_\_