Town of Kiowa Transient Dealer Business License Application

(For Retail AND Food Vendors)

Date:	
Business Name:	
Business Type:	
Owner:	Phone:
Business Address:	
Mailing Address:	
State Sales Tax Number:	
Special Event: Elbert County Fair	
Fee: \$10.00	
I affirm that the information contained in this application is true and accurate.	
Applicant Signature	Date

Please make checks payable to the Town of Kiowa and mail to P.O. Box 237 Kiowa, CO 80117

OR submit application and payment online at:

www.townofkiowa-co.gov