



APPLICATION FOR A MUNICIPAL NON-PROPERTY SALES TAX PERMIT
AS REQUIRED UNDER ORDINANCE NO. 09-0826-1 OF THE CITY OF VICTOR, IDHAO

Name of Business _____

Location of Business _____

Mailing Address of Business _____

Email Address of Business _____

Name of Owner _____ Phone Number _____

Residence of Owner _____

Type of Ownership: Sole Proprietorship _____ Corporation _____
Partnership _____ Other (Specify) _____

If the ownership is other than sole proprietorship, list below all partners, officers, and director, principals and/or authorized agents.

| Name | Mailing Address |
|-------|-----------------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Type of Business _____

Municipal Sales Tax: The Victor Non-property Sales Tax rates are 1% on retail and liquor by the drink sales, and 3% on lodging/short term rentals (30 days or less).

- I acknowledge and understand that I am required to collect and remit the above tax using the same remittance schedule as required by the Idaho State Tax Commission. Taxes are to be remitted to the City for each calendar month on or before the 20th day of the succeeding month. (Initial) _____
- I further acknowledge and understand that I am required to submit a copy of the Idaho State Sales Tax return for the month at the same time said taxes are paid to the City Clerk. (Initial) _____
- If any other remittance schedule is required, I acknowledge and understand that I am required to submit documentation showing the same schedule for Idaho State Tax Commission and have attached it to this application. (Initial) _____

The undersigned hereby makes application for a Municipal Non-Property Sales Tax Permit as required under Ordinance 09-0826-1 of the City of Victor, Idaho.

THIS PERMIT IS NONTRANSFERABLE BY SALE, LEASE, ASSIGNMENT OR OTHERWISE.

DATED this _____ day of _____, 20_____.

Applicant

Assigned Permit No. _____

Opening Date _____