



**Ogden City Corporation
Special Public or Civic Event License**

The following business has paid the requisite fee and is hereby authorized to conduct business.

Event Name: _____ Location: _____

Dates at event: _____ to _____, 20____

Business Name: _____

Business Owner's Name: _____ Phone Number _____

Business Mailing Address: _____

Temporary Event Sales Tax Number: _____

I, we _____ hereby agree to conduct said business strictly in accordance with the laws and ordinances covering such business, and understand that it is unlawful to make any false statement, declaration or report as required in this application.

Date _____ 20 ____ Applicant Signature _____

Fee Amount \$ _____ Received by _____



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During the period _____ to _____, 20____

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Business Owner's Name: _____ Phone Number _____

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