

INSTRUCTIONS TO APPLICANT

Please complete license information in its entirety. Incomplete applications will not be processed.

Application fee \$25.00.

Please make checks payable to: City of Santa Rosa

Mail the application and remittance to: City of Santa Rosa, 244 S 4th Street, Santa Rosa, NM 88435

Name of Business	
Business Location	
Contact Person	
Contact Phone Number	
NM CRS #	
Nature of Business	
Applicant	
Applicant Home Address	
Applicant Home Phone	
Applicant Business Phone	

Application is hereby made for Business License to be issued:

Signature

Printed Name

Date