

General Information

Murray City requires that a valid business license be held by anyone conducting business within Murray City. "Business" means and includes every craft, trade, occupation, profession or activity pursued for gain or profit excluding, however, services rendered by an employee to an employer.

Non-profit, charitable, governmental, insurance agencies and real estate agents are also required to obtain a business license although they may be exempt from license fees.

A business address is the physical location where such business is to be conducted. A PO Box or mailbox service address are not valid business addresses and cannot be accepted. Each business location will need a separate license. Temporary businesses and seasonal businesses are also required to obtain licenses and permits.

Licenses are not transferable from address to address, or from owner to owner. Any change of location, ownership, or corporate information requires a new application to be submitted. Minor changes such as mailing address may be submitted without application.

A person conducting business in the city without first obtaining a business license or a person operating a business that has been closed for nonrenewal shall be assessed a one hundred percent (100%) penalty on past due fees including any regulatory fees. (City Code 5.04.280: Penalty fees for failure to obtain a license.)

Re-application notices are mailed out on the first of the month in which the license expires. In order to avoid penalty fees, the re-application form and payment must be received in our office prior to the expiration date. We do not accept post marks as timely receipts and cannot be responsible for lost or misdirected mail. Responsibility of renewal is total responsibility of the licensee. Failure to receive notices does not excuse this responsibility.

Murray City requires that a written notice be submitted if a business has moved out of the City or is no longer conducting business. Please note that license fees are non-refundable.

A property owner authorization form completed by the property owner is required to conduct business if the business owner is renting the home/apartment. A copy of this form is available on our City website and must be included with the application at the time it is submitted.

Application Information

Prior to submitting an application for a business license, please contact the City Planning and Zoning Division (801-270-2420) to verify that your type of business is allowed. All State and local requirements must be met before submitting your application. Please include verification of these requirements with your application.

The average business license processing time is 7 - 10 business days. This time may vary in circumstances where a conditional use, Health Department approval, etc. is needed. Murray City does not offer interim licensing. Please be aware that you must have your business license issued prior to opening/operating. If you are still under construction, or your projected opening date is more than 3 weeks out, please do not turn in your application any sooner than 3 weeks prior to opening.

Fees for licenses vary according to number of employees, vehicles and classifications. Please refer to the fee schedule page included with your application for details. Fees are due at the time of submitting an application. License fees are non refundable should a license not be approved. Fees are also required for change of address and are not prorated.

Once an application is submitted, approvals and/or inspections are required by Murray City Fire Department, Murray City Zoning Department and Murray City Code Enforcement. Businesses may also need to complete inspections by the Salt Lake County Health Department or other applicable agencies. When all applicable departments have approved the application, a business license will be issued.

BUSINESS LICENSE APPLICATION CHECKLIST

The following must be included with your application at the time it is submitted. We cannot accept applications until all State and local requirements are met. A list of State agencies with addresses and phone #'s are included with this application (New Business Compliance Information).

- ___ Owner/Corporate Officer List (Corporations, LLC & Partnerships)
- ___ Federal Tax ID/EIN # (Sole proprietors, with no employees can use their social security number in lieu of an EIN #)
- ___ Sales Tax Account # (All businesses responsible for collection of sales & use tax. Sales tax account must list the Murray business address as an outlet)
- ___ Utah Department of Commerce Articles of Incorporation
- ___ State License if applicable, from the Utah Division of Occupational and Professional Licensing - DOPL
- ___ Business Responsible Form (Murray City Police Department)
- ___ Industrial Discharge Questionnaire (All businesses except "office only" and mall kiosks)

- ___ Bond (Murray Municipal Code 5.04.230) An applicant engaged in the following business activities, must also provide Murray City with an original bond in the amount indicated indemnifying the city against personal injury or property damage. Bond needs to show Murray City Corporation as the obligee.

- Auctioneers, Auction Houses \$1000.00
- Pawnbrokers; secondhand dealers;
Secondhand precious metal dealers \$5,000.00
- Security systems and equipment;
Alarm sales/installation \$5,000.00
- Excavation in right of way \$5,000.00 minimum
- Sexually oriented business \$2,000.00
- Locksmith \$1,000.00
- Massage Establishment (not owned by massage therapist) \$1,000.00
- Moving and Storage \$1,000.00
- Cable; other home installation \$1,000.00

*Surety bonds are obtained through various insurance agencies. Please check with your insurance company for additional information.

___ Background investigation (Murray City Municipal Code 5.04.260) A background check and personal data sheet is required on each owner, officer and manager for the following list of business classifications.

- Pawnbrokers, secondhand dealers, swap meets, flea markets
- Private investigators and detectives
- Gun Shops
- Coupon book sales
- Beer/Alcohol sales (retail stores, lounges, taverns, fairgrounds, 1 day gatherings, cabarets, private clubs, restaurants)
- Sexually oriented businesses
- Coin dealers
- Massage establishments (including owner, operator, manager, managing employee or any other employee who is not, and who is not required to be, licensed by the state division of occupational and professional licensing as a massage therapist or apprentice).
- Arcades
- Establishments which restrict admittance based solely on age

*Background investigations (FBI checks) can be obtained through BCI, 801-965-4445, 3888 W 5400 S, West Valley City, Utah

NEW BUSINESS COMPLIANCE INFORMATION

NOTE: This list may not be complete, depending upon your business type, in some cases some or none may apply. Please contact the agencies listed for help in deciding which items will apply to your specific business situation. It is the responsibility of the owner/manager to seek out any other governmental agencies involved in the regulations of their business. Please keep in mind that this is a guideline only.

STATE TAX INFORMATION

For information related to Income Tax, State Sales Tax, Use Taxes and other applicable state taxes, contact the State Tax Commission.

210 N. 1950 W., Salt Lake City, Utah 84134
Phone: 801-297-2200

FEDERAL EMPLOYER'S TAX ID NUMBER & FEDERAL TAX INFORMATION

Contact the IRS for information related to income, excise, self employment, tip credits and other federal taxes. Every person who pays wages to one or more employees, or is required to file federal reports, must apply for a tax number. The IRS also provides a business tax kit and tax seminar for businesses. The seminar will provide you with basic instructions and forms. Sole proprietors, with no employees, may use their social security number in lieu of an EIN number. If you have questions, please contact the IRS.

50 S. 200 E., Salt Lake City, Utah 84111
Phone: 1-800-829-1040

REGISTRATION OF A BUSINESS NAME / CORPORATIONS

All persons or partnerships doing business in Utah under an assumed business name must register with the Secretary of State. Corporations, LLC's, etc. must file articles and name registration. (Exceptions: Federally Chartered Banks, Sovereign Nations, & Insurance Agents)

Department of Commerce: Heber M. Wells Building
160 E. 300 S. Salt Lake City, Utah 84111
Phone: 801-530-4849
Cost: Corp. Filing Fee \$52.00 Registration of Name: \$22.00

STATE BUSINESS LICENSING

Under certain circumstances, a special state business license may be required for your business. Consult with The Utah Department Of Registration for more information. A state license does not exempt the business from obtaining a local business license.

Heber M. Wells Bldg.
160 E. 300 S., Salt Lake City, Utah 84111
Phone: 801-530-6628

FOR VEHICLE LICENSES, i.e.: DEALERS, AUTO BODY WORK, ETC. CONTACT THE UTAH STATE DIVISION OF MOTOR VEHICLE ENFORCEMENT.

210 N. 1950 W., Salt Lake City, Utah 84134
Phone: 801-297-2600

SALT LAKE COUNTY HEALTH DEPARTMENT

Salt Lake County Health Department has requirements for newly licensed and permitted establishments such as: Cosmetology, Day Cares, Massage, Tanning facilities, Hotels/Motels, Restaurants and other food and drink establishments. (Ownership changes are considered newly licensed & are required to be approved prior to beginning or continuing business). Please contact the Health Department for information.

788 E. Wood Oak Lane (5380 South), Murray Utah 84107
Phone: Food Protection: 385-468-3845 (Restaurants, Bars, Food Services)
All Other Departments: 385-468-3835 (All Other Issues: Sanitation, Salons, Etc.)
Prepackaged Consumption Items: Contact the Dept. of Agriculture: 801-538-7124

SAFETY REGULATIONS

Contact the Utah Labor Commission, Division of Occupational Safety and Health (Utah OSHA):

Heber M. Wells Building
160 E. 300 S. 3rd Floor, Salt Lake City, Utah 84111
Phone: 801-530-6901 or 1-800-530-5090
www.laborcommission.utah.gov

PROPERTY TAXES

Property taxes are levied on land, buildings & equipment used in a business. Please contact the Salt Lake County Treasurer for information:

2100 S. State Street, Salt Lake City, Utah 84190
Phone: 801-468-3050

UNEMPLOYMENT INSURANCE

Unemployment insurance, both state & federal, is generally required in firms with one or more employees. For information, contact the Department of Workforce Services - DWS.

140 East 300 South, Salt Lake City, Utah 84145
Phone: 1-800-222-2857

WORKERS COMPENSATION INSURANCE

Workers compensation insurance is required of all employers. This insurance may be obtained from private companies or the Worker's Compensation Fund. For information, contact The Utah Labor Commission, Division of Industrial Accidents. Businesses without employees may be required to complete an exclusion policy or worker's compensation waiver. For more information:

Heber M. Wells Bldg.
160 East 300 South 3rd Floor, Salt Lake City, Utah 84111
Phone: 801-530-6901 or 1-800-530-5090
www.laborcommission.utah.gov

MINIMUM WAGE LAW

Many businesses are subject to federal minimum wage, overtime and child labor law regulations. For information, contact the U.S. Department of Labor, Wage & Hour Division:

Salt Lake City District Office
Eagle Gate Plaza & Tower
60 East South Temple Street, Suite 575
Salt Lake City, Utah 84111-1016
Phone: 801-524-5706 or 1-866-4-USWAGE (1-866-487-9243)

For businesses not under federal jurisdiction, please contact the Utah Labor Commission – Wage Claim Unit:

Heber M. Wells Bldg.
160 East 300 South 3rd Floor, Salt Lake City, Utah 84111
Phone: 801-530-6901 or 1-800-530-5090
www.laborcommission.utah.gov

ADDITIONAL RELATED PHONE NUMBERS:

Better Business Bureau	801-892-6009
Bureau of Child Care Licensing	801-538-9288
Division of Consumer Protection	801-530-6601
Department of Motor Vehicles	801-297-2600
DABC (Alcohol Licensing)	801-977-6800
BCI (Background Investigations)	801-965-4445 3888 W 5400 S, West Valley City, Utah (FBI check)
Insurance Division	801-538-3800

**MURRAY CITY BUSINESS LICENSING
FEE SCHEDULE**

Base License Fee: All businesses, excluding home occupations, are subject to a base license fee of one hundred dollars (\$100.00) plus six dollars (\$6.00) per employee and ten dollars (\$10.00) for each vehicle used in conjunction with your business.

5.04.280: PENALTY FEES FOR FAILURE TO OBTAIN A LICENSE: A person conducting business in the city without first obtaining a business license or a person operating a business that has been closed for nonrenewal shall be assessed a one hundred percent (100%) penalty on past due fees including any regulatory fees.

Business License Regulatory Fees: The following regulatory fees are assessed in addition to all the base business license fees:

Alcohol - Off Premise Beer Retailer	\$200.00	Day Care – Commercial	\$150.00
Alcohol – On Premise Restaurant, Private Club, Tavern Beer	\$500.00	Day Care – Home Occupation	\$175.00
Alcohol – Special Event Alcohol/Beer	\$100.00	Inspection only for non-licensed or exempted	\$ 50.00
Auto Body Repair and/or Paint Hazardous Mat.	\$350.00	Tobacco Retailer	\$200.00
Beauty Salon, Barber Shop, Personal Care	\$100.00	Mobile Painting Hazardous Material	\$350.00
Convalescent Home, Group Homes, Rehabilitation Facility	\$250.00	Spa/Massage	\$100.00
Gasoline/Propane Dispensing Hazardous Mat.	\$350.00	Hazardous Materials, Hazardous Materials Hospital	\$350.00
Hotel/Motel	\$250.00	Auto Towing/Wrecking	\$150.00
Pawn Broker	\$200.00	Tattoo Parlor	\$250.00
Storage Unit Facility	\$150.00	Second Hand Dealer	\$100.00
Sexually Oriented Business	\$500.00	Amusement Device	\$150.00
		Fireworks Indoor/Outdoor, Christmas Tree Sales	\$160.00

This listing may not be all inclusive. Fees for additional inspections, investigations, etc., may not be listed.



BUSINESS LICENSE APPLICATION

Murray City Corporation
 4646 South 500 West
 Murray, Utah 84123
 (801) 270-2420

FOR OFFICE USE ONLY	
<input type="checkbox"/> New Account	<input type="checkbox"/> New Address
<input type="checkbox"/> New Owner	<input type="checkbox"/> Update Only
Control # _____	

****Incomplete Applications Will Be Returned****

Location Type: Residential ___ Commercial ___ Ownership: Corporation ___ LLC ___ Partnership ___ Sole Proprietor ___ *Corporations, LLC & Partnerships must provide a current list of Corporate Officers, Partners, Members and Directors.	Federal ID # (FEIN or SSN) _____ Utah Sales Tax # _____ State License # & Type (if applicable) _____ _____
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Are you currently operating at this location? Yes ___ No ___ What is/was your opening date? _____

Business Name _____

DBA Name _____

Business Address _____ City _____ Zip Code _____

Mailing address (include City, State & Zip) _____

Business Phone _____ Email: _____

Emergency Contact Person _____ Emergency Contact Phone _____

Detailed Description of Business _____

Owner Information (If corporate owned, list the corporation name as the owner's name, list the address & phone number of the corporation & complete the owner/officer sheet)

Owner's Name _____

Owner's Address (include City, State & Zip) _____

Owner's Birth Date _____ Email _____

Owner's Phone Number _____ Phone (other) _____

Owner's Driver's License No _____ State _____

Base Fee: (\$100.00)		\$ _____
Regulatory Fees: type _____		\$ _____
type _____		\$ _____
type _____		\$ _____
Number of Employees: _____ @ \$6.00 per employee		\$ _____
Number of Vehicles: _____ @ \$10.00 per vehicle		\$ _____
Rental Units: residential _____ @ \$6.00 per unit		\$ _____
commercial _____ @ \$2.00 per unit		\$ _____
	Fees subtotal:	\$ _____
Add 100% of your subtotal if conducting business prior to obtaining a business license per Murray City Code 5.04.280		\$ _____
**Fees are non-refundable should license not be approved	Total amount due:	\$ _____

I am aware that this application does not authorize conducting business until approved by Murray City Corporation and a business license has been issued. By signing below, I swear that the foregoing information is true and correct and is in accordance with Murray City Ordinances. Responsibility of changes and renewal is total responsibility of licensee. Failure to receive notices does not excuse this responsibility. License will be valid only for the Licensee, business name, address & activity as listed above.

Owner or Officer Signature Required _____ Title _____ Date _____

OWNERS, OFFICERS AND MEMBERS INFORMATION LIST
MURRAY CITY CORPORATION
(BUSINESS LICENSE APPLICATION)

Please supply us with information on all Owners, Officers and Members associated with your business

****Incomplete Applications Will Be Returned****

Name:		Title
Home address:	Apt/Suite #	Birth Date:
City:	State:	Zip Code:
Phone:	Drivers License No.	State:
Name:		Title
Home address:	Apt/Suite #	Birth Date:
City:	State:	Zip Code:
Phone:	Drivers License No.	State:
Name:		Title
Home address:	Apt/Suite #	Birth Date:
City:	State:	Zip Code:
Phone:	Drivers License No.	State:
Name:		Title
Home address:	Apt/Suite #	Birth Date:
City:	State:	Zip Code:
Phone:	Drivers License No.	State:
Name:		Title
Home address:	Apt/Suite #	Birth Date:
City:	State:	Zip Code:
Phone:	Drivers License No.	State:



MURRAY
POLICE

MURRAY CITY CORPORATION
POLICE DEPARTMENT

Dear Business Owner:

The Murray City Police Department continually strives to work effectively with the business community in Murray City. Towards this end, I would encourage you to complete the business responsible form enclosed with this letter.

The information provided on this form will enable the Police Department to contact you should there be a problem or emergency at your place of business. Valuable time will be saved in locating a responsible party to assist the police in answering questions or having someone respond. The multiple names listed will assist us in making contact should someone not be available.

Your cooperation in completing this form will help us to better serve you and your customers. The Murray City Police Department is committed to working with its citizens and business leaders to make Murray City a better and safer community.

Sincerely,

Craig Burnett
Chief of Police

Business Responsible Form

Murray City Police Department

Business Name: _____

Address: _____

Business Phone: _____

Responsible Parties

Name: _____ Date of Birth: _____ Title: _____

Home Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

Name: _____ Date of Birth: _____ Title: _____

Home Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

Name: _____ Date of Birth: _____ Title: _____

Home Address: _____

City/State/Zip: _____

Home Phone: _____ Cell Phone: _____

Alarm Company: _____

Type of Alarm (i.e. motion, smoke, intrusion etc.): _____

Is this a home based business? Yes No

**MURRAY CITY FIRE DEPARTMENT
BUSINESS INSPECTION INFORMATION LETTER
ACCORDING TO THE INTERNATIONAL FIRE CODE**

Welcome, new business owner, to the City of Murray. To assist your start-up and help things run a little smoother, here are a few things you can do.

If you are a home business doing telephone, computer or office-related work, or a kiosk, Murray City Fire does not require an inspection. ***All other businesses*** require a physical inspection of the business. If you are not sure about the requirements for your business, please contact our office for clarification.

Your business location must be occupied and set up, ready to do business, prior to inspection. We cannot inspect empty buildings.

***If your business is under construction or your anticipated start-up date is 10 days or more from the time you submit your business license application, please inform the Business Licensing office and indicate the date you would like to open on your application.**

Please be aware that a business license cannot be issued without necessary approvals and inspections being completed.

Remember!

You must submit your business license application to the Business Licensing office before an inspection can be set up.

Our fire inspectors will call you 24 to 48 hours after receiving your application to set up an inspection time.

Fire Marshal's Office

For more information or questions call,

Phone:	Mike Dykman	Office, (801) 264-2786, Mobile, (801) 502-4954
	Pat Killion	Office, (801) 264-2776, Mobile, (801) 573-7381
	George Zboril	Office, (801) 264-2773, Mobile, (801) 856-2616

Main Fire Department Office, (801) 264-2781

INDUSTRIAL DISCHARGE QUESTIONNAIRE

New Business Form Renewal Form

Name of Business _____

Property Address (street,city,zip) _____

Mailing Address (street,city,zip) _____

Company Official (name) _____

Company Official (title) _____ (phone #) _____

Facility is: Owned Leased Home Business Other _____

1. Brief description of business, products produced, services provided, etc. _____

2. Standard Industrial Classification Code (SIC) (_____) [if known]

3. Average Number of Employees: Day _____ Afternoon _____ Night _____ Total _____

4. Check Types of Wastewater Discharges

Sanitary wastes (rest rooms) Non-contact Cooling Water Contact Cooling Water Equipment Wash Down Boiler Blowdown

Process Wastes (List Types) _____

Other discharges _____

5. List Expected Daily Water Use (Gallons Per Day) _____

6. Are any of your process discharges regulated by Federal Categorical Discharge Standards? Yes No

If yes, list Standards: (Code of Federal Regulations) _____

7. Will chemicals be used or stored on site? Yes No

If yes, list chemicals that will be on site in quantities of 55 gallons or more on the back of this form.

8. Will hazardous waste be generated at this facility? Yes No

If yes, list types on the back of this form.

I have personally examined and am familiar with the information submitted in this report and any attachments. Based on my inquiry of those individuals immediately responsible for obtaining the information reported herein, I believe that the information reported herein, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature _____ Date _____

(CENTRAL VALLEY USE ONLY)

Classification _____ Grease, Oil, or Sand Interceptor Required Yes No

Reviewed by (MEC) _____ Date _____

Reviewed by (CVS) _____ Date _____

Reviewed by (CVS) _____ Date _____

(OVER)

CHEMICALS USED

CHEMICAL NAME	AMOUNT STORED	AMOUNT USED

HAZARDOUS WASTES

NAME	EXPECTED MONTHLY GENERATION QUANTITY	DISPOSAL METHOD