

City of Driggs
Transitory Business Registration Form

Please complete and return this form along with a \$50 processing fee to the City of Driggs, P.O. Box 48, Driggs, ID 83422, as required by Ordinance 272-07. The Fire Marshall and the City of Driggs Building Inspector will inspect all businesses prior to issuance of registration.

Name of Business: _____

Owner of Business: _____

Authorized Agent Completing Form: _____

Mailing Address of Business: _____

Business Phone: _____ Cell: _____ Email: _____

Will Business be Conducted at Various Residences, Commercial Buildings or Properties? _____

Physical Address Where Business is Temporarily Located: _____

Address at Second Location: _____

Attach additional sheets if necessary

Name and Phone of Property Owner: _____

Name and Phone of Property Owner: _____

*A signed letter of permission from each property owner must be submitted if applicable
Businesses selling items for human consumption must submit a copy of a State Health Certificate*

DESCRIBE THE NATURE OF THIS BUSINESS

Check one:

_____ : **Mobile Vendor** - a business exhibiting goods or services from a vehicle, trailer, on foot or in a similar mobile manner for not more than one hour in twenty-four (24) hours on any one site, or which is operating during an approved public event on property owner or leased by a governmental entity, with approval of the event organizer.

_____ : **Temporary Vendor** - a business, other than a mobile vendor, exhibiting goods or services within the City of Driggs from a temporary or mobile structure or vehicle or in a similar temporary manner for fourteen (14) or fewer days in any one year period. (The applicant must provide a parking plan, trash receptacle(s), a safe area for pedestrian circulation and conform to lighting standard as stated in the Design Standards and Guidelines.)

_____ : **Seasonal Vendor** - a business, other than a mobile vendor, exhibiting goods or services within the City of Driggs from a temporary or mobile structure or vehicle or in a similar temporary manner for more than fourteen (14) days in any year, but for less than one hundred eighty (180) days in any year. (The applicant shall be guided by the Design Standards and Guidelines. Waivers be approved for non-applicable or overly-burdensome requirements)

Are you required to collect Idaho sales tax? _____

Is this a nonprofit business? _____

Will proceeds be used for nonprofit purposes? _____

Will you serve alcoholic beverages? _____

Number of employees or anticipated number: _____ Full time: _____ Part time: _____

Signature: _____ Title: _____ Date: _____

P.O. Box 48 • 60 South Main Street • Driggs, Idaho 83422 • (208) 354-2362 • Fax: (208) 354-8522