



Utility Customer Services Division
Business & Animal Licensing
 316 North Park Avenue
 Helena, MT 59623

: Phone: (406) 447-8450
 : Fax: (406) 447-8377
 : Email: citywater@helenamt.gov

helenamt.gov

GENERAL BUSINESS LICENSE APPLICATION

City ordinance 4-1-2 requires that all commercial enterprises operating within the Helena City limits to obtain a business license. If a commercial enterprise has multiple locations, City ordinance 4-1-2A requires each individual location to be licensed separately.

PLEASE PRINT CLEARLY:

Business Name: _____

Location Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Owner Name: _____ Phone: _____

Email: _____

Applicant Name (if other than owner): _____ Phone: _____

Co-Owner Manager Legal Representative Other

Email: _____

Business Activity: _____

PLEASE BE AS SPECIFIC AS POSSIBLE AS TO THE TYPE OF BUSINESS CONDUCTED

- This business is located inside outside the Helena City limits.
- This business is considered a Home Occupation.
- This business provides/sells Alcoholic Beverages under the State of Montana License number #_____.
- This business has six (6) or more gaming machines.
- This business provides Auctioneer or Pawnbroker services under Federal ID Number #_____.
- This business provides/sells Tobacco or tobacco products.
- This business is a Medical Marijuana Dispensary under State of Montana License #_____.
- This business is a Medical Marijuana Grow operation under State of Montana License #_____.
- This business is a Mobile vendor.
 Vehicle description: _____

FEE SCHEDULE*

<input type="checkbox"/>	Home Based** with no employees	\$10.00		<input type="checkbox"/>	11-20 FTEs	\$100.00
<input type="checkbox"/>	1-4 FTEs ***	\$25.00		<input type="checkbox"/>	21-40 FTEs	\$200.00
<input type="checkbox"/>	5-10 FTEs	\$50.00		<input type="checkbox"/>	41 or more FTEs	\$400.00

*Fee is pro-rated to 50% after July 1st for new business applications.

** This license fee is only for self-employed persons with no employees and operating a business from the person's residence.

***The number of full-time equivalent employees (FTEs) is determined by dividing the total number of hours worked by all employees of the business for the previous calendar year by 2080. **(For businesses located outside Helena city limits the fee is based only on the FTE's working within Helena City Limits.)**

I certify that this business being licensed is not a trade, occupation, pursuit, profession or entertainment prohibited by any law of the United States or the State of Montana, or by any provision of City of Helena code except that medical marijuana dispensaries and medical marijuana grow operations are permitted.

I acknowledge that it is the responsibility of the licensee to notify the City of Helena within thirty (30) days if any of the information contained within the licensee's application has changed. Failure to do so may result in penalties and interest on license renewals and/or suspension or revocation of the license as provided for in City Code 4-1-3.

I hereby certify that I am the legal owner or legal representative of the above named business.

Applicant Signature: _____

Date: _____