

**CITY OF AURORA**  
**TEMPORARY RETAIL BUSINESS/SALES TAX LICENSE**  
00100-40501 / 454390

**ALL INFORMATION REQUESTED ON THIS FORM IS REQUIRED. WE ARE UNABLE TO PROCESS INCOMPLETE FORMS.**

**BUSINESS INFORMATION**

Business Name: \_\_\_\_\_

Business Owner: \_\_\_\_\_

Federal Employer Identification Number (FEIN):

(If no FEIN, provide social security number (SSN) of business owner.) \_\_\_\_\_

Phone Number: \_\_\_\_\_

Business/Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EVENT INFORMATION**

This temporary business/sales tax license is valid only for the event, location and dates shown below.\*

Location of Event: \_\_\_\_\_

\*Date(s) of Event: \_\_\_\_\_

**\*Per Aurora city code sections 86-86 and 86-91d, no temporary retail event may exceed seven consecutive days and no temporary retail business may be issued more than five temporary retail business licenses within any 12-month period.**

Type of Product Sold: \_\_\_\_\_

**SALES TAX INFORMATION**

TAXABLE SALES	\$	
TAX RATE 3.75%		x .0375
TAX DUE	\$	_____

Signature: \_\_\_\_\_

RETURN TO:

CITY OF AURORA TAX  
PO BOX 913200  
DENVER, CO 80291-3200

- \* Remit tax due to the City of Aurora by the 20<sup>th</sup> of the month following the month in which the event began.
- \* Return this form with your payment and retain a copy for your records.
- \* Make checks/money orders payable to CITY OF AURORA.