

Village of Los Ranchos de Albuquerque  
Business Application 2010

\$35 Business

Late Fee \$10

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

Owner: \_\_\_\_\_ Email Address: \_\_\_\_\_

Business WEB address: \_\_\_\_\_

Business Address: \_\_\_\_\_ Los Ranchos, NM \_\_\_\_\_  
Street Zip Code

Phone Numbers: \_\_\_\_\_  
Business Cell Fax

Mailing Address (if different from business address):  
Street City Zip Code

24 Hour Emergency Numbers:

Contact Name: \_\_\_\_\_ Phone No. \_\_\_\_\_

Type of Business (check one)

- Construction (license No.) \_\_\_\_\_
- Manufacturing
- Massage therapy (license No.) \_\_\_\_\_
- Professional Office
- Restaurant
- Retail
- Service
- Other (specify) \_\_\_\_\_

- Individual
- Partnership
- Corporation (NMSCC No.) \_\_\_\_\_
- LLC (NMSCC No.) \_\_\_\_\_

State Gross Receipts Information

Company CRS filed under: \_\_\_\_\_

CRS No. \_\_\_\_\_

Attachment Checklist  
For Official Use Only

- Application
- CRS copy of registered no.
- Site Plan
- Sign Permit
- Copies of all licenses
  - Barber or Cosmetology
  - Construction
  - Massage Therapy
  - Restaurant Environmental

For Official Use Only

Year: \_\_\_\_\_

Registration # \_\_\_\_\_

Registration Date: \_\_\_\_\_

Receipt No. \_\_\_\_\_

Check No. \_\_\_\_\_

Fire Inspection Completed: \_\_\_\_\_

Staff Name: \_\_\_\_\_

I certify to the best of my knowledge that this application is true and correct.

Signature & Title/Position

Date

Print Name Clearly