



BUSINESS REGISTRATION APPLICATION

Community Development Department

VILLAGE OF LOS LUNAS

660 Main Street NW
Los Lunas, NM 87031
(505) 839-3842

INITIAL APPLICATION

1. BUSINESS NAME AND INFORMATION

Business Name _____

Doing Business As _____

Mailing Address (if different from below) _____ City _____ State _____ Zip _____

Business Location:

☐ Physical location/office within Los Lunas

Address _____

☐ Mobile (Parking at various locations)

☐ Contractor

Business Phone _____ Business Email _____

NM State Tax ID# (copy of certificate required) _____ Board/License # (copy of certificate required) _____

Business Type:

☐ Proprietorship / Sole Ownership

☐ Corporation

☐ LLC

☐ Partnership

☐ Not for Profit

☐ Other _____

2. OWNER INFORMATION

Business Owner(s) _____

Mailing Address _____ City _____ State _____ Zip _____

Email _____ Phone _____

3. CONTACT FOR LOCAL OPERATIONS*

*Must be an individual person or office, generally responsible for site operations.

Name(s) _____ Title _____

Address _____ city _____ state _____ zip _____

Email _____ Phone _____

4. BUSINESS ACTIVITIES

a) Description of Service Provided _____

b) Los Lunas Operations Start Date _____

c) Is this activity new for this location? ☐ Yes ☐ No ☐ N/A If yes, what was the previous use? _____

d) Will there be any reconstruction or improvements made to the building? ☐ Yes ☐ No ☐ N/A If yes, other permits may be required.

e) Are there any existing signs on the premises of your building? ☐ Yes ☐ No ☐ N/A

Do you intend to repair any existing signs or install any new ones? ☐ Yes ☐ No ☐ N/A If yes, other permits may be required.

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4. BUSINESS ACTIVITIES - CONT'D

f) Are there any vending machines in your establishment? ☐ Yes ☐ No ☐ N/A

If yes: How many vending machines? _____ How many music/amusement machines? _____

Please note: There will be a \$2.00 fee for each merchandise vending machine in your establishment and/or a \$5.00 fee music and amusement machines, which will be added to your registration fee each year.

g) Will your business be run out of your home? ☐ Yes ☐ No ☐ N/A

If yes, you will need to complete a Home Occupation Registration Application in addition to this application.

5. SUPPORTING DOCUMENTS*

☐ *Included (Required)* **NMBTIN CERTIFICATE (Note this is the state tax information and not the federal FEIN)**

☐ *Included* ☐ *Not Applicable* **HOME OCCUPATION APPLICATION**

☐ *Included* ☐ *Not Applicable* **VILLAGE OF LOS LUNAS FIRE REVIEW**

☐ *Included* ☐ *Not Applicable* **STATE OF NEW MEXICO BOARD LICENSE OR CERTIFICATE**

☐ *Included* ☐ *Not Applicable* **FOOD PERMIT**

**Other documents may be required.*

6. SIGNATURE(S) OF AUTHORIZED APPLICANT(S)

I understand that my signature below indicates that all information contained on this application is true and complete.

Printed Name _____ Signature _____ Date _____

OFFICE USE ONLY

Permit #: _____ Received Date: _____ Zone: _____

☐ APPROVED ☐ DENIED ☐ WITHDRAWN Reviewed By: _____ Date: _____

Notes

For Cashier's Use Only

FEE CALCULATION

| | | |
|---------------------------|----------------|-----------------|
| BUSINESS REGISTRATION FEE | _____ | \$ 25.00 |
| VENDING MACHINE FEE | \$2.00 x _____ | \$ _____ |
| AMUSEMENT MACHINE FEE | \$5.00 x _____ | \$ _____ |
| TOTAL FEES | _____ | \$ _____ |