



BUSINESS REGISTRATION APPLICATION

COMMUNITY DEVELOPMENT DEPARTMENT

VALENICA COUNTY

444 LUNA AVE

LOS LUNAS, NM 87031

(505) 866-2050

BUSINESS NAME AND INFORMATION

BUSINESS NAME _____

DOING BUSINESS AS _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

BUSINESS LOCATION:

☐ PHYSICAL LOCATION/OFFICE WITHIN VALENICA COUNTY ADDRESS: _____

☐ MOBILE (PARKING AT VARIOUS LOCATIONS)

☐ OUT OF COUNTY – ADDRESS _____

BUSINESS PHONE _____ BUSINESS EMAIL _____

NM STATE TAX ID# _____ NAICS# _____

BUSINESS TYPE:

☐ PROPRIETORSHIP/SOLE OWNERSHIP

☐ CORPORATION

☐ LLC

☐ PARTNERSHIP

☐ NOT FOR PROFIT

☐ OTHER _____

OWNER INFORMATION

BUSINESS OWNER(S) _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____ PHONE _____

CONTACT FOR LOCAL OPERATIONS

*MUST BE AN INDIVIDUAL PERSON GENERALLY RESPONSIBLE FOR SITE OPERATIONS

NAME(S) _____ TITLE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____ PHONE _____

BUSINESS ACTIVITIES

DESCRIPTION OF SERVICES PROVIDED _____

IS THIS ACTIVITY NEW FOR THIS LOCATION? ☐ YES ☐ NO ☐ N/A

IF YES, WHAT WAS PREVIOUS USE? _____

WILL THERE BE ANY RECONSTRUCTION OR IMPROVEMENTS MADE TO THE BUILDING? YES ☐ NO ☐ N/A ☐

***IF YES OTHER PERMITS MAY BE REQUIRED**

ARE THERE ANY EXISTING SIGNS ON THE PREMISES OR BUILDING? YES ☐ NO ☐ N/A ☐

***IF YES OTHER PERMITS WILL BE REQUIRED**

DO YOU INTEND TO INSTALL SIGNS ON PREMIS OR BUILDING? YES ☐ NO ☐ N/A ☐

***IF YES OTHER PERMITS WILL BE REQUIRED**

WILL YOUR BUSINESS BE RUN OUT OF YOUR HOME? YES ☐ NO ☐ N/A ☐

***IF YES YOU WILL NEED TO COMPLETE A HOME OCCUPATION CHECKLIST IN ADDTION TO THIS APPLICATION.**

SUPPORTING DOCUMENTS

☐ INCLUDED (REQUIRED)

☐ INCLUDED (REQUIRED)

☐ INCLUDED ☐ NOT APPLICABLE

☐ INCLUDED ☐ NOT APPLICABLE

☐ INCLUDED ☐ NOT APPLICABLE

☐ INCLUDED ☐ NOT APPLICABLE

☐ INCLUDED ☐ NOT APPLICABLE

☐ INCLUDED ☐ NOT APPLICABLE

NM TAX ID CERTIFICATE (OBTAINED FROM NM TAXATION & REVENUE)

VALENCIA COUNTY PROPERTY TAX OBLIGATION FULFILLMENT

CERTIFICATE (ATTACHED)

HOME OCCUPATION CHECKLIST

VALENCIA COUNTY FIRE INSPECTION

STATE OF NM BOARD LICENSE OR CERTIFICATE

FOOD HANDLERS PERMIT

PERMIT TO OPERATE (OBTAINED FROM NM ENVIROMENTAL)

NM DOT DRIVEWAY ACCESS PERMIT (STATE HIGHWAY ACCESS ONLY)

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 _____

----- **OFFICIAL USE ONLY** -----

PERMIT #: _____ RECIEVED DATE: _____ ZONING: _____

RECEIVED BY: _____ REVIEWED BY: _____

☐ APPROVED

☐ DENIED

☐ BUSINESS REGISTRATION FEE \$25.00 PD: _____ DATE: _____



VALENCIA COUNTY TREASURER

RON SAIZ

PROPERTY TAX OBLIGATION FULFILLMENT CERTIFICATION

Date: _____

To Whom It May Concern:

This letter serves as certification that all property tax obligations associated with the property located at:

Property Address: _____

Parcel/Account Number: _____

have been paid in full and are current as of the date of this letter.

To the best of my knowledge and belief, there are no outstanding delinquent property taxes, penalties, or interest due on the above-referenced property.

This certification is provided in support of an application/renewal for a **business license in Valencia County, New Mexico.**

Should additional information or documentation be required, please get in touch with the undersigned.

Sincerely,

A handwritten signature in blue ink, appearing to read "Ron Saiz", with a small vertical stamp to the left.

Ron Saiz
Valencia County Treasurer
PO Box 939
Los Lunas NM 87031
505-866-2094

Treasurer's File