



130 6TH STREET WEST
ROOM A
COLUMBIA FALLS, MT 59912

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2023 General Business License Application

All businesses are required to obtain a city business license unless exempt by Montana State Law. Applicant must provide State Statute of Exemption to be exempt. Persons with a vacation rental or persons with (4) or more rental units are required to obtain a city business license. Home Occupations must comply with zoning regulations and are subject to approval by building inspector/TCPO. Application fee along with application must be returned to the City Clerk by expiration date of current license.

Per **Title 1, Chapter 1.03, Section 1.03.010 of the Columbia Falls City Code**, "...any person violating any of the provisions or failing to comply with any of the mandatory requirements of any ordinance of the City is guilty of a misdemeanor. Any person convicted of a misdemeanor under any of the ordinances of the City shall be punished by a fine not to exceed five hundred dollars. Each person is guilty of a separate offense for each and every day, or any portion thereof, in which any violation of any provision of the ordinances of the city is committed, continued or permitted by any such person, and upon conviction thereof is punishable accordingly."

City Business Licenses are to be visibly posted in the place of business.

License Type (Choose one):	Cost
<input type="checkbox"/> Annual: January 1 - December 31	\$40.00
<input type="checkbox"/> Quarterly (Seasonal/Temporary Only): January 1 - March 31	\$12.50
<input type="checkbox"/> Quarterly (Seasonal/Temporary Only): April 1 - June 30	\$12.50
<input type="checkbox"/> Quarterly (Seasonal/Temporary Only): July 1 - September 30	\$12.50
<input type="checkbox"/> Quarterly (Seasonal/Temporary Only): October 1 - December 31	\$12.50
<input type="checkbox"/> Special Event: 3 days	\$10.00

Name of Business: _____

Type of Business: _____

Owner/Manager: _____

Telephone: _____

Physical Address _____

of Business: _____

Mailing Address _____

of Business: _____

Business Email: _____

Signature: _____ Date: _____

OFFICE USE ONLY		
Date Received: _____	Amount and Method of Payment: _____	
License Number: _____	Added to BL: _____	Initials: _____