



City of Ketchum

City Sales Tax Permit Application as required under Ketchum Municipal Code Chapter 3.12

Submit completed application by email to taxes@ketchumidaho.org or mail to the City Clerks Office, PO Box 2315, 191 5th St W., Ketchum, ID 83340. If you have questions, please email the above address or call (208) 726-3841.

BUSINESS CONTACT INFORMATION	
Business Name:	Doing Business As:
Business Physical Address:	
Business Mailing Address:	
Business Phone No:	Emergency Phone No:
Business Email: New Business: Yes <input type="checkbox"/> No <input type="checkbox"/> Description of Business:	Business Website: If new business, date of opening: If seasonal, which months are you closing:
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other: _____(specify)	If ownership is other than sole proprietorship, list below all partners, officers, directors, principals and/or authorized agents (name and address) <i>*use a separate sheet if necessary</i> _____ _____ _____ _____
OWNER PERSONAL INFORMATION	
Name:	
Personal Mailing Address:	
Residential Physical Address:	
The undersigned agrees to collect the following applicable taxes: <input type="checkbox"/> Three percent (3%) on all rents or leases for temporary lodging of thirty (30) days or less; <input type="checkbox"/> Three percent (3%) on all Liquor-By-the-Drink which includes, alcohol, spirits, beer and wine sold for consumption on the premises; <input type="checkbox"/> Two percent (2%) on all materials delivered by vendors in constructing, altering, repairing, and improving real estate; <input type="checkbox"/> Two percent (2%) on all other retail sales subject to taxation under Idaho Code 63-3601, et. Seq. Idaho Sales Tax Act except on the sale of groceries and motor vehicles, which are titled by the Idaho Department of Motor Vehicles, as defined in Ketchum Municipal Code Chapter 3.12.	

The undersigned further agrees to remit the above municipal taxes for each (this should correspond to the timing of payment of State sales taxes):

Calendar month
Calendar quarter
Annually

One-time tax (Dates: to)

Name of Event:

On or before the 20th day of the succeeding month to the City Clerk Office, P.O. Box 2315, Ketchum, Idaho 83340

The undersigned hereby makes application for a City Sales Tax Permit as required under Ketchum Municipal Code Chapter 3.12. THIS PERMIT IS NONTRANSFERABLE BY SALE, LEASE ASSIGNMENT OR OTHERWISE.

Applicant agrees to observe all City ordinances, laws and conditions imposed. Applicant agrees to defend, hold harmless and indemnify the City of Ketchum, its officers and employees from all liability claims, suits and costs arising from incidents or accidents occurring under this permit. Applicant certifies that s/he has read and examined this application and that all information contained herein is true and correct.

Applicant Signature

Printed Name

Date

OFFICIAL USE ONLY	
Date Received:	Permit Number:
Received By:	
Comments:	