



**2017 NEW BUSINESS REGISTRATION**  
**ALL ENTRIES ARE REQUIRED**

**VILLAGE OF CORRALES**

**INCOMPLETE APPLICATIONS WILL BE RETURNED WITH YOUR PAYMENT!**

<b>Business Name</b> (as it will appear on license):			
Is this business name the same name as registered on your CRS? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, under what name is your business registered with Taxation and Revenue?			
<b>Business Owner Name:</b>			
<b>Business Mailing Address:</b>			
<b>Business Physical Address:</b>			
<b>Business Phone:</b>		<b>Home Phone (For Office Use Only):</b>	
<b>New Mexico CRS Number:</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
<b>GRT Paid</b> (check one): <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly <input type="checkbox"/> Semi-Annually			
<b>Application is for:</b> <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Co. Owners, Partners, Corporate Officers			
<b>Name</b>	<b>Title</b>	<b>Address</b>	<b>Phone No.</b>
Do you handle hazardous or toxic materials?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does Business require a permit from the New Mexico Environment Dept.?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does Business require a permit from the Federal Environment Protection Agency?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does Business require a license from the State of New Mexico?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does Business require a contractor's license?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>Primary Type of Business:</b>		<input type="checkbox"/> Construction	<input type="checkbox"/> Manufacturing
		<input type="checkbox"/> Personal Service	<input type="checkbox"/> Business Service
		<input type="checkbox"/> Other: Specify _____	<input type="checkbox"/> Retail <input type="checkbox"/> Wholesale Trade
Nature of Business (Max. 5 words)			
<input type="checkbox"/> OWN <input type="checkbox"/> RENT - <b>MANDATORY: If renting, include property owners <u>LETTER OF AUTHORIZATION WITH PROPERTY OWNER EMERGENCY CONTACT INFORMATION</u> to conduct business on property; authorization letter <u>MUST</u> be on file in Village Office.</b>			

I affirm that the above information is true and correct. I understand that it is my responsibility to notify the Village of Corrales of any changes to my business information.

Signature \_\_\_\_\_

Date \_\_\_\_\_

\*\*FOR OFFICE USE ONLY\*\*

P&Z Approval: _____ Date	Home Occupation Permit: ZOC - _____	Building Inspector Approval: _____ Date	Fire Department: _____ Date
Zone: _____	Received by: _____	Permit: _____	Inspection: _____
Received by: _____	Receipt No: _____	Business ID: _____	Date Cert. Sent: _____
Payment type: <input type="checkbox"/> CASH <input type="checkbox"/> CC <input type="checkbox"/> CHECK    NO.			





Village of Corrales  
 4324 Corrales Road  
 Corrales, New Mexico 87048  
 505-897-0502  
[www.Corrales-NM.org](http://www.Corrales-NM.org)

**\$35.00 Fee**  
 Due at time of  
 Permit

**Contractor/Remodel Contractor**  
**Parcel Permit Application / Ordinance 09-008**

\_\_\_\_\_  
**Construction Permit  
 ID Number**

Date \_\_\_\_\_

Parcel Address \_\_\_\_\_

**Village of Corrales, NM 87048**

Submit legal description if no address:

Subdivision \_\_\_\_\_ Tract \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_

Name \_\_\_\_\_

PLEASE PRINT

Business Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

Contractor

Remodel

Contract Amount \$ \_\_\_\_\_ License No. \_\_\_\_\_

Estimated Date of Completion \_\_\_\_\_

**NAME OF ENTITY GROSS RECEIPTS TAXES ARE PAID UNDER:**

\_\_\_\_\_  
 New Mexico CRS Number:             
 CRS Filed: Monthly [ ] Quarterly [ ] Semi-Annually [ ] Annually [ ]

***I certify that the above statements are true and accurate.***

\_\_\_\_\_  
 SIGNATURE

**EACH PARCEL REQUIRES A SEPERATE PERMIT**  
**REUSE OF PERMIT PROHIBITED**

**FOR STAFF USE ONLY**

Date of Permit \_\_\_\_\_

Receipt No. \_\_\_\_\_ Check No. \_\_\_\_\_ Cash \_\_\_\_\_ Credit Card \_\_\_\_\_

**GROSS RECEIPTS INFORMATION**

All gross receipts should be coded as follows:

**Location/Municipality: Village of Corrales**

**Location County: Sandoval County**

**Location Code: 29-504 (make sure this number is shown on all filings)**

If you have sold, constructed, or remodeled in the Village of Corrales in the past three years please check your filings to be sure the correct CRS-1 code of 29-504 was utilized.

**CONTRACTORS, SUB-CONTRACTORS:**

I, \_\_\_\_\_ agree to designate all gross receipts taxes owed to the Village of Corrales, Sandoval county code of 29-504.

I agree to inform the Village of Corrales once I have completed the site the property or job project.

\_\_\_\_\_  
SIGNATURE

**Jurat**

STATE OF NEW MEXICO    )

)

COUNTY OF SANDOVAL    )

Subscribed and sworn to (or affirmed) before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

By: (name of person) \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC