



1245 W Hwy 96 \* Arden Hills MN 55112  
 Phone 651.792.7800 \* Fax 651.634.5137  
[www.cityofardenhills.org](http://www.cityofardenhills.org)

# 2019 City Business License/Registration

## Property Information *(please print)*

Company Name	
Applicant Name and Social Security Number (per State Statute 270C.72, Subd. 3)	
Property Address:	
Local Phone #	MN Tax ID # (per State Statute 207C.72, Subd. 3)
Local Fax #	Federal Tax ID # (per State Statute 207C.72, Subd. 3)
Local Contact	E-mail Address
Nature of Business	

## Preferred Mailing Information *(if different from above)*

Company Name:			
Mailing Address:	City:	State:	Zip:
Contact Name:	Contact Phone Number:	Contact Fax Number:	

## License Types *(check all that apply, see fees on reverse)*

- |                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Amusement Facility<br><input type="checkbox"/> Amusement Devices - #Loc _____ #Dev _____<br><input type="checkbox"/> Bulk Fuel Storage - _____ units<br><input type="checkbox"/> Charitable Gambling<br><input type="checkbox"/> Courtesy Bench - Non adv. - _____ benches<br><input type="checkbox"/> Courtesy Bench - Adv. - _____ benches<br><input type="checkbox"/> Drive-thru Restaurants | <input type="checkbox"/> Firework Sales<br><input type="checkbox"/> Grocery Store - _____ sq ft<br><input type="checkbox"/> Hotel/Motel - _____ rooms<br><input type="checkbox"/> Massage Therapist<br><input type="checkbox"/> Massage Therapist Establishment<br><input type="checkbox"/> Peddler/Sol./Transient<br><input checked="" type="checkbox"/> <b>Permanent Signs - _____ signs</b> | <input type="checkbox"/> Restaurants - _____ sq ft<br><input type="checkbox"/> Retail Sales<br><input type="checkbox"/> Service Stations<br><input type="checkbox"/> Street Vending<br><input type="checkbox"/> Tobacco Sales<br><input type="checkbox"/> Waste/Recycle Halers<br><input type="checkbox"/> Other _____ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Required Submittals

- Payment - see reverse side for **Fee Schedule**
- Certificate of Liability Insurance of at least \$100,000 for bodily injury to any one person, including accidental death, and not less than \$300,000 aggregate; property damage liability of at least \$100,000 for each accident and not less than \$100,000 aggregate.
- Certificate of Worker's Compensation to the minimum acceptable levels of the State of Minnesota.  
**OR: Signed Worker's Compensation Waiver:**  
  
 If you are a sole proprietor and have chosen not to carry worker's comp, the following waiver must be signed:  
 As a sole proprietor or partnership, I/we have chosen not to carry Worker's Compensation Insurance on myself/ourselves.

\_\_\_\_\_

Applicant Signature

\_\_\_\_\_

Date

All Applicants Sign Here:

Date:

## FOR CITY USE ONLY *(when applicable):*

COM. DEVELOPMENT: By:		Approved:	Denied:	Date:
FIRE INSPECTOR: By:		Approved:	Denied:	Date:
PUB. SAFETY DIR: By:		Approved:	Denied:	Date:
CITY COUNCIL: By:		Approved:	Denied:	Date:

The City Council will be approving the 2019 Fee Schedule at its December 10, 2018 meeting. At this time, there are no proposed increases in fees for 2019.

City of Arden Hills – 2018 Fee Schedule		
Sidewalk Sales		\$53.00
Business Licensing – Amusement Facilities	Includes arcade, dance hall, movie theater, pool/billiard tables, bowling alleys, indoor tennis, skating facility, outdoor tennis, driving ranges, etc.	\$105.00
Business Licensing – Wholesale Bulk Fuel Storage	Liability insurance required	\$210.00
Business Licensing – Hotel/Motel		\$6.50/room
Business Licensing – Courtesy Bench, Non-advertising		\$26.00
Business Licensing – Courtesy Bench, Advertising		\$79.00
Business Licensing – Mechanical/Electronic Devices	Includes musical devices, amusement rides, bowling alleys, etc.	\$15.00/location + \$15.00/machine (State Statute 449.15 limits fees to \$15)
Business Licensing – Retail Sales	Includes antique shops, beauty/barber shops, boat dealers, Christmas tree sales, dry cleaning, laundry, bakery, candy, meats, wholesale foods, caterers, motor vehicle sales, optometrist, mortuary, video sales/rentals, over-the-counter tobacco sales, vending machines (excluding tobacco), & other retail goods not listed	\$53.00
Business Licensing – Restaurants, Cafes, Coffee Houses, etc.		\$21.00/per 1,000 square feet, or fraction thereof
Business Licensing – Restaurants, drive-thru		\$315.00
Business Licensing – Service Stations		\$105.00
Business Licensing – Grocery		\$21.00/per 1,000 square feet, or fraction thereof
Charitable Gambling Permit – Per Minnesota State Statute, Chapter 349	Includes investigation fee	\$158.00
Tobacco Sales License	Includes investigation fee	\$300.00
Fireworks Sales	As part of existing business	\$100.00 (MN Statute 624.20 sets maximum permit fee at \$100.00)
Fireworks Sales	Exclusive Business	\$350.00 (MN Statute 624.20 sets maximum permit fee at \$350.00)
Massage Therapist	Annual Fee, Includes investigation fee	\$53.00
Massage Therapist Establishment	Annual Fee, Includes investigation fee	\$158.00
Solicitors, Peddlers, Transient Permit – For-Profit Organizations	Please reference Section 350 of the Municipal Code for more information	\$158.00 background investigation + \$105.00/month permit fee
Solicitors, Peddlers, Transient Permit – Non-Profit Organizations	Please reference Section 350 of the Municipal Code for more information	No charge
Rubbish Hauler	Annual	\$158.00
Recycling Hauler	Annual	\$158.00
<b>Permanent Signs, Annual Renewal</b>	<b>Per Sign, 100 square feet or less</b>	<b>\$25.00 each</b>
Investigation Fees		
Tobacco, Liquor, Charitable Gambling, & Solicitor's Permits		\$158.00