



Village of Corrales
 4324 Corrales Road, Corrales, NM 87048
 Phone: (505) 897-0502 Fax: (505) 897-7217
 Email: tromo@corrales-nm.org

BL
 Fire
 Total
 Expires:
 Date Paid:
 Payment:

Receipt #:
BL Received:

Application for Business Registration/License

Please complete all the information on this form as completely and accurately as possible by typing or using blue or black ink. Please contact us at (505) 897-0502 with any questions.

SECTION 1 – TYPE OF LICENSE

NEW BUSINESS

- OR -

RENEWAL

- Cannabis Establishment Commercial Non-Profit
- Home Occupation Planning & Zoning # _____
- Short Term Rental Out of Village Other (please specify) _____

Business Name: _____

Primary Contact: _____

First Name	Last Name	Title
------------	-----------	-------

Physical Address: _____

Street Number	City/State	Zip
---------------	------------	-----

Mailing Address: _____

PO Box/Street	City/State	Zip
---------------	------------	-----

Phone #: _____ **E-mail:** _____

SECTION 2 – CORPORATION/TAX INFORMATION

NM CRS/TAX ID NUMBER: _____ - _____ - _____

The state of New Mexico requires anyone engaged in business in New Mexico to register with the Taxation and Revenue Department. During registration, each business will be provided with a State Tax ID number, also known as a CRS ID Number. If you do not have a CRS number, please visit: **if the business operates in multiple jurisdictions (like a Food Truck for example), please use GRT location code 29-504 for the Village of Corrales.** Failure to use this code when filing your GRT taxes will result in your taxes being paid to a different municipality instead of Corrales. For more information, please visit: www.tax.newmexico.gov

Type of Ownership: _____
 Corporation/LLC/partnership/sole Proprietor/Non-Profit/Etc.

Nature of Business: _____

NAICS Code: _____

You may search for your NAICS code at; <https://www.naics.com/search/> OR use the provided list.

Do/will you derive over 51% of your income from the state of New Mexico? YES NO

SECTION 3 – CORPORATE PERSONNEL

Owner/CEO: _____
First Name Last Name Title

Physical Address: _____
Street Number City/State Zip

Other Officer: _____
First Name Last Name Title

Physical Address: _____
Street Number City/State Zip

SECTION 4 – ADDITIONAL REQUIREMENTS

- 1. Have you complied with the Wastewater Ordinance? YES NO
(NOT APPLICABLE FOR HOME-BASED BUSINESSES)
- 2. Do you handle hazardous, toxic, or radioactive materials? YES NO
- 3. Does your business require any of the following permits/licenses? YES NO

- NEW MEXICO ENVIRONMENT DEPARTMENT FOOD PERMIT
- FEDERAL ENVIRONMENTAL PROTECTION AGENCY PERMIT(S)
- A CONTRACTOR’S LICENSE ISSUED BY THE STATE OF NEW MEXICO
- NEW MEXICO STATE LIQUOR OR CANNABIS LICENSE
- MEDICAL/PHARMACEUTICAL LICENSE(S)
- OTHER STATE OR FEDERAL LICENSE (PLEASE SPECIFY) _____

If you answered YES to any of the above, please attach a copy of the permits and/or licenses

****PLEASE NOTE: A FIRE INSPECTION BY THE VILLAGE OF CORRALES FIRE DEPARTMENT IS REQUIRED FOR MOST BUSINESSES LOCATED IN THE VILLAGE PRIOR TO RECEIVING YOUR LICENSE.**

SECTION 5 – SIGNATURE OF APPLICANT

By signing this form, I attest that the information I have provided herein is true and accurate to the best of my knowledge. I certify that I am authorized to sign the same as an agent on behalf of the above stated business. I agree to pay all associated fees for my registration including the annual business registration fee, applicable fire inspection fees and any other applicable permit fees as required by the Village of Corrales. I understand that I must file any changes to my business status, operations, and/or contact information with the Village Clerk’s office in a timely manner. I further understand that the business license fee and fire inspection fees are paid annually and that I will be responsible for the renewal requirements.

SIGNATURE: _____ DATE: _____
(MUST BE AN OWNER, PARTNER, OR CORPORATE OFFICER OF THE BUSINESS)

PRINTED NAME: _____ TITLE: _____

SECTION 6 – APPROVALS

ZONING APPROVAL:

Approved

Not Approved

ZONING SPECIALIST

DATE

CURRENT ZONING

FIRE INSPECTION:

Approved

Not Approved

VILLAGE OF CORRALES FIRE CHIEF

DATE

DATE OF INSPECTION

BUILDING INSPECTION:

Approved

Not Approved

CERTIFIED BUILDING OFFICIAL

DATE

DATE OF INSPECTION