

Business Registration Certificate (BRC)

Year: _____



7550 Sunwood Drive NW
Ramsey, Minnesota 55303
Main (763) 427-1410
Fax (763) 427-5543

All businesses with the intent to operate in the City must first obtain a Business Registration Certificate (BRC) issued by the City 30 days prior to occupancy. (Ch 26, Art. III)

Instructions:

1. Print legibly or type.
2. Complete entire application.
3. Do not leave any lines blank. Use "NA" if it is "not applicable" to your business.
4. Sign and date completed application.
5. Send completed application and fee (if applicable) to the address indicated on back of form.

Choose: **New Business (Fee: \$30)** **Renewal** **Home Occupation ***

*Home occupations are not required to register their business. However, registered home occupations will be listed on the City Business List available to the public. Application fees still apply.

LOCAL CONTACT INFORMATION

Name of Business: _____ Business Type: _____

DBA: _____

Business Address: _____ Suite #: _____

Mailing Address (only if different): _____

Business Phone: _____ Fax: _____

Previous Occupant: _____ Hours of Operation: _____

Do you have an Automated External Defibrillator (AED) on site? Yes No If yes, how many? _____

What brand AED? _____

PRIMARY BUSINESS CONTACT PERSON

Name: _____ Daytime Phone: _____

Title: _____ Email: _____

KEY HOLDER CONTACT INFORMATION

(After hours emergency contacts) Please list 3 contact names in the order they should be contacted.

Name 1: _____

Home Phone: _____

Cell/Pager: _____

Name 2: _____

Home Phone: _____

Cell/Pager: _____

Name 3: _____

Home Phone: _____

Cell/Pager: _____

(Complete BOTH sides)

PROPERTY INFORMATION

PROPERTY OWNER

Name: _____ Phone # _____

Address: _____ Suite #: _____

City: _____ State: _____ Zip: _____

MANAGEMENT GROUP

Name: _____ Phone # _____

Address: _____ Suite: # _____

City: _____ State: _____ Zip: _____

ON SITE HAZARDS

	Amount	Type	Storage Location
Hazardous Materials			
Explosives/Ammunition			
Fire Arms/Weapons			

ALARM & SECURITY SYSTEM INFORMATION*

Alarm Company: _____ Dispatch phone #: _____

Type of Alarm System: _____
 (Examples: Water Flow, Burglar, Glass Break)

**** Please Note:** The Police Department imposes a civil penalty after the 3rd false alarm in a calendar year. **

SIGNATURE REQUIRED

I hereby certify that the above information is accurate. In the event that the above information should change I will notify the City of Ramsey within 30 days of said change. I understand that the application fee is non-refundable. I also understand that it is my responsibility to obtain all other permits or licenses required by the City of Ramsey in accordance with Chapter 26 of City Code and any other applicable regulatory agencies.

 Signature Printed Name Date

Application Return Information
 Return completed application and fee to:

City of Ramsey
 Attn: BRC
 7550 Sunwood Drive NW
 Ramsey, MN 55303

----- CITY OFFICE USE ONLY -----

Date: _____	PYMT \$ _____	Check # _____
Planning: _____	<input type="checkbox"/> With Conditions	<input type="checkbox"/> Without Conditions
Building: _____	<input type="checkbox"/> With Conditions	<input type="checkbox"/> Without Conditions
Entered: <input type="checkbox"/>	BRC sent: <input type="checkbox"/>	

10/2014