



**Lodger's Vendor Information
Colfax County**

Check One: <input type="checkbox"/> New Application <input type="checkbox"/> Renewal <input type="checkbox"/> Termination

Business Name: _____

Business Mailing Address: _____ **City:** _____

Business Physical Address: _____ **City:** _____

Phone #: _____ **Fax #:** _____ **Email:** _____

Owners Name: _____

New Mexico State Bureau of Revenue Identification Number: Tax ID # _____

- **Total Number of Rooms:** _____
 Rate per night: _____
- **Total Number of RV spaces w/hookups:** _____
 Rate per night: _____
- **Total Number of RV spaces with-out hook ups:** _____
 Rate per night: _____
- **Total Number of pop-up Tents Spaces:** _____
 Rate per night: _____
- **Total Number of Short-Term Vacation Rental Rooms:** _____
 Rate per night: _____

Signed: _____

Date: _____

PLEASE COMPLETE & RETURN TO
Colfax County Manager's Office
% Tina Colangelo
tcolangelo@co.colfax.nm.us
PO Box 1498
Raton, New Mexico 87740
575-445-9661 Ext 7705