

LODGING VENDOR'S LICENSE APPLICATION

- 1. TYPE OF BUSINESS _____
- 2. NAME OF BUSINESS _____
- 3. NAME & ADDRESS OF OWNER OF BUSINESS _____

- 4. NAME & ADDRESS OF OPERATOR OF BUSINESS _____

- 5. TELEPHONE NUMBER _____
- 6. PHYSICAL ADDRESS OF RENTAL _____
- 7. TOTAL NUMBER OF AVAILABLE LODGING ACCOMMODATIONS(i.e.rooms, RV spaces, Campsites) _____
- 8. NUMBER OF ACCOMMODATIONS WHICH RENT FOR LESS THAN \$2.00 PER DAY _____
- 9. NUMBER OF ACCOMMODATIONS PERMANENTLY LEASED FOR PERIODS IN EXCESS OF 30 DAYS _____
- 10. ACCOMMODATION RATE (Please state each rate for which you rent accommodations and the number of accommodations which rent for each rate.) _____

SIGNATURE OF APPLICANT _____

DATE OF APPLICATION _____

APPLICATION APPROVED _____

PLANNING DEPARTMENT

DATE OF APPROVAL _____

**(Return completed application to: County of Lincoln
Planning Department
109 Kansas City Road
Ruidoso, NM 88345**

Email Application to: publicworks@lincolncountynm.gov