



License # \_\_\_\_\_

**CITY OF HOBBS  
MOBILE BUSINESS LICENSE  
ORDINANCE NO.930**

Please complete and return application to the City of Hobbs, City Clerk's Office, 200 East Broadway, Hobbs, NM, 88240. The Mobile License fee is \$100.00, valid for one calendar year and the applicant must obtain a Business Registration for \$25.00, making a combined total annual fee of \$125.00. This license expires December 31 of each year.

**MOBILE BUSINESS LICENSE APPLICATION AND AFFIDAVIT**

**STATE OF NEW MEXICO )**  
**) SS.**  
**COUNTY OF LEA )**

**COMES NOW THE UNDERSIGNED AND STATES THE FOLLOWING:**

**PERSONAL INFORMATION**

Name \_\_\_\_\_

Permanent Residence Address \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

Telephone No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Driver's License No. & State of Issue \_\_\_\_\_

Proof of Residency \_\_\_\_\_

*(Please attach a copy of your local Driver's License, Utility Bill with a Local Address or a Lease Agreement of 30 days or longer.)*

**BUSINESS INFORMATION**

Business Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street Address \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

Telephone No. \_\_\_\_\_

Type of goods, wares, merchandise or services to be sold (specific description):

\_\_\_\_\_

Vehicle Description (specific description):

\_\_\_\_\_

More than one (1) Mobile Truck/Trailer: Yes \_\_\_\_\_ or No \_\_\_\_\_

If Yes, List the License Plate No. \_\_\_\_\_

**New Mexico Business Tax Identification No.** \_\_\_\_\_

**(PLEASE PROVIDE PROOF OF BUSINESS TAX ID #)**

**NOTE: THIS APPLICATION MUST BE SIGNED BEFORE A NOTARY PUBLIC.**

\_\_\_\_\_  
**APPLICANT SIGNATURE**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_.

\_\_\_\_\_  
**TITLE OF OFFICE: NOTARY PUBLIC**

**My Commission Expires:**

\_\_\_\_\_

**CHAPTER 5.04.060: ALL PERSONS PROPOSING TO ENGAGE IN BUSINESS WITHIN THE MUNICIPAL LIMITS OF THE CITY SHALL APPLY FOR AND PAY A BUSINESS REGISTRATION FEE FOR EACH OUTLET, BRANCH OR LOCATION WITHIN THE MUNICIPAL LIMITS OF THE CITY PRIOR TO ENGAGING IN BUSINESS.**

**FOR OFFICIAL USE ONLY:**

Entered into MUNIS:

By: \_\_\_\_\_ Date: \_\_\_\_\_

Date Paid: \_\_\_\_\_

Receipt #: \_\_\_\_\_ Start Date: \_\_\_\_\_

Business Registration Issued: Yes: \_\_\_ No: \_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Scanned:

By: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_