



**ELECTRIC CITY**

**Business License Application**

Fee Must Accompany Application – Non Refundable			
Business Name: _____  Physical Address: _____  Business Phone No.: _____  Business Fax No: _____	Mailing Address: _____  _____  _____		
<b><u>KIND OF BUSINESS</u></b> <input type="checkbox"/> General <input type="checkbox"/> Other <input type="checkbox"/> Reciprocal <input type="checkbox"/> Temporary <input type="checkbox"/> Itinerant	<b><u>HOME OCCUPATION</u></b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b><u>PLEASE INDICATE OWNERSHIP STATUS:</u></b> <input type="checkbox"/> Partnership <input type="checkbox"/> Corp. <input type="checkbox"/> Individual <input type="checkbox"/> Non-Profit	
<b>DESCRIPTION OF BUSINESS (Give Details)</b>  _____  _____		<b>ID NUMBERS REQUIRED:</b>  Federal ID: _____  WA State UBI# : _____  Contractor's License: _____	
<b>LIST OWNERS, PARTNERS OR OFFICERS</b>  First Name: _____ Middle Initial: _____ Last Name: _____ DOB: _____  First Name: _____ Middle Initial: _____ Last Name: _____ DOB: _____		<b>REQUIRED PERMITS (HEALTH, ETC)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No   Permit No. _____	

APPLICATION FEES
<input type="checkbox"/> <b><u>New License - \$35</u></b> <input type="checkbox"/> Temp. Bazaar License-\$35.00 <small>Per occurrence</small>
<input type="checkbox"/> <b><u>Renewal License-\$25*</u></b> <input type="checkbox"/> Exempt License-N/C
<input type="checkbox"/> Relocation Fee (business address change)-\$5
<input type="checkbox"/> Delinquent Fee-\$10 each month (begins May 1) <small>*Includes Reciprocal</small>
<b>Investigative Fee</b> <input type="checkbox"/> Business and/or Owner-\$25 (Required for all New Businesses)

**I certify that the forgoing information is true and correct by penalty of perjury:**

**Signed By:** \_\_\_\_\_

**Office/Title:** \_\_\_\_\_

**Application Date:** \_\_\_\_\_

**A Copy of the owners Drivers License or ID must accompany this application!**

**NOTE: Additional City applications or permits may be required before the owner can commence business. Please allow up to five business days for processing. If you change your business address, nature of business, or if you are no longer doing business in Electric City, please notify the City Clerk's Office.**

**NOTE: Any itinerant going door to door must have a business license with them at all times.**

**OFFICE STAFF USE ONLY – Do not write below this line.**

- |                                      |                 |
|--------------------------------------|-----------------|
| 1. Bldg. Official _____              | 4. Fire _____   |
| 2. Clerk or Designee _____           | 5. Police _____ |
| 3. Public Works Superintendent _____ |                 |

Amount Paid	Date Issued	Expiration Date: <u>2/28/</u>	Receipt #	License Number
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