

FOR OFFICE USE ONLY	
CUSTOMER Number _____	
OBL. NR. _____	AMT. _____
OBL. NR. _____	AMT. _____
OBL. NR. _____	AMT. _____

**APPLICATION FOR BUSINESS LICENSE      Annual Fee \$90.00**

*The license is for the calendar year, January through December. For a business that opens July 1 or thereafter, the half-year fee is \$45.00\**

*The half-year fee does NOT apply to any years prior to 1998. The Seattle business license expires December 31.*

*\*If worldwide annual gross income and/or value of products is estimated as \$20,000 or less, the license fee is \$45.00 (\$22.50 for half-year fee).*

**PLEASE PRINT OR TYPE - COMPLETE BOTH SIDES OF THE APPLICATION**

Your business will be assigned a City of Seattle CUSTOMER NUMBER. Refer to the Customer Number in any future correspondence relating to your license. Let us know if you previously had a Seattle business license. The account will be deemed a reinstatement ONLY if it has been closed for at least 12 months.

Please provide the information in the first section if it is available. The ID numbers are not required to obtain a City of Seattle business license.

State of Washington UBI # \_\_\_\_\_ FEIN \_\_\_\_\_

State of Washington Contractor # \_\_\_\_\_ City of Seattle Vendor ID # (if applicable) \_\_\_\_\_

Internet Address (if applicable) \_\_\_\_\_

S.I.C. Code _____	(office use only)
N.A.I.C.S. Code _____	(office use only)

Have you previously had a Seattle Business License?    YES    NO

**PLEASE COMPLETE ALL SECTIONS BELOW and the REVERSE SIDE OF THIS FORM PROVIDING the BUSINESS INFORMATION**

**TYPE OF BUSINESS** (Check ONE)    Sole Proprietor    Corporation    Partnership    LLC    Other \_\_\_\_\_

Is the business a non-profit organization?    Yes    No   (Non-profit organizations are required to be licensed and file tax returns as all other businesses.)

**LEGAL NAME OF BUSINESS ENTITY** \_\_\_\_\_  
 (If a sole proprietorship, please list your legal name, last name first, and include any middle initial.)

**TRADE NAME** or dba (doing business as) \_\_\_\_\_

WHAT IS THE **STARTING DATE OF BUSINESS IN SEATTLE?**   Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

*If the business was operating in Seattle before the current year, prior years' license fees, taxes, penalties and interest may be due.*

**Zoning Limitations** - A business license does not authorize the holder to conduct business in violation of any zoning ordinance.

The location of your business should be indicated below. You must list a physical address (a post office box or mail drop is not considered a physical address).

**PHYSICAL BUSINESS LOCATION:** \_\_\_\_\_

ADDRESS	CITY	STATE	ZIP
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IS THIS LOCATION BEING **ADDED AS A BRANCH ONLY TO AN EXISTING LICENSE?**    YES    NO

Mailing address for LICENSE & RENEWAL \_\_\_\_\_  
 SAME AS ABOVE   ADDRESS   CITY   STATE   ZIP

Mailing address for TAX FORMS \_\_\_\_\_  
 SAME AS ABOVE   ADDRESS   CITY   STATE   ZIP

BUSINESS PHONE: \_\_\_\_\_ - \_\_\_\_\_ CELLULAR PHONE \_\_\_\_\_ - \_\_\_\_\_ FAX \_\_\_\_\_ - \_\_\_\_\_

**LIST OTHER BUSINESS LOCATIONS IN SEATTLE** - Each BRANCH LICENSE FEE is \$10.00 per year (attach a separate sheet, if needed).

TRADE NAME	ADDRESS	SEATTLE ZIP CODE	TELEPHONE	"Separate" tax reporting status?
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

**PLEASE COMPLETE THE BACK SIDE OF THE APPLICATION - ALL INFORMATION AND A SIGNATURE IS REQUIRED TO PROCESS**

