



## *Business License Renewal*

*Instructions:*

- Please **print** or **type**
- Application must be signed
- Please answer **all** questions
- If the form is not fully completed, a delay in processing the application can occur

1. Name of Business: \_\_\_\_\_

DBA (if applicable): \_\_\_\_\_

Business Phone: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Web address: \_\_\_\_\_

2. Contact Information:

Name: \_\_\_\_\_

Daytime Phone #: \_\_\_\_\_

Email address: \_\_\_\_\_

3. Number of employees: \_\_\_\_\_ Please estimate FTE\*: \_\_\_\_\_

\* FTE-Full Time Equivalents are the combination of one or more employees whose work hours equal that of a full-time position, normally 40 hours a week.

I certify the above information is correct:

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

Business License Fee:

\$50.00

Return the application and fee to City Hall, Attn: Business License Application Processing, PO Box 608, Ridgefield, WA 98642

Business Licenses are valid from January 1 through December 31 and must be renewed annually.

Application must have the name and nature of the business, business addresses, business owner information, emergency notification name and address, the type of business, and the number of employees filled in. No license will be issued if this information is not present. This application is subject to RCW Chapter 42.56 regarding disclosure of public documents.

Office Use Only

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

License Fee \$50.00 \_\_\_\_

Issued By: \_\_\_\_\_

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

Transportation Benefit District:  Yes  No

Notified of sales tax code: \_\_\_\_\_