



# BUSINESS LICENSE APPLICATION

<p><b>Business Name:</b> _____</p> <p><b>Business Location:</b> _____ (No PO Box)</p> <p style="text-align: center;">City State Zip</p> <p><b>Mailing Address:</b> _____ (If different)</p> <p style="text-align: center;">City State Zip</p> <p><b>Bus. Phone:</b> ( ) _____ <b>Bus. Fax:</b> ( ) _____</p> <p><b>Email Address:</b> _____</p> <p><b>WA State UBI No.:</b> _____ <b>NAICS No.:</b> _____</p> <p><b>Contractor's Lic No.:</b> _____</p> <p><b>License Type</b> _____ <b>Exp. Date</b> _____</p> <p><b>Ownership:</b> <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> PLLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Trust</p>	<p style="text-align: center;"><b>Please Check One:</b></p> <p><input type="checkbox"/> New Application</p> <p><input type="checkbox"/> Change of Owner (additional fee required)</p> <p><input type="checkbox"/> Change of Location (additional fee required)</p> <p><input type="checkbox"/> Change of Business Name</p> <hr/> <p style="text-align: center;"><b>Open/Start Date in Bothell:</b></p> <hr/> <p style="text-align: center;"><b>Description of Business (Required):</b></p> <hr/> <hr/> <hr/> <hr/> <hr/>
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**ENTER BELOW NAMES OF OWNERS, PARTNERS, OR CORPORATE OFFICERS - Attach additional pages if necessary**

<p><b>Owner Name:</b> _____</p> <p><b>Home Address:</b> _____</p> <p><b>Phone:</b> _____</p> <p><b>Driver's License No.:</b> _____</p> <p><b>Alternate ID (State, Active Military or Passport):</b> _____ (Photocopy of ID required)</p>	<p><b>Title:</b> _____</p> <p><b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____</p> <p><b>Email:</b> _____</p> <p><b>State Issued:</b> _____ <b>Date of Birth:</b> _____</p>
<p><b>Owner Name:</b> _____</p> <p><b>Home Address:</b> _____</p> <p><b>Phone:</b> _____</p> <p><b>Driver's License No.:</b> _____</p> <p><b>Alternate ID (State, Active Military or Passport):</b> _____ (Photocopy of ID required)</p>	<p><b>Title:</b> _____</p> <p><b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____</p> <p><b>Email:</b> _____</p> <p><b>State Issued:</b> _____ <b>Date of Birth:</b> _____</p>

**Business Location:**

King Co. (in City)    Sno Co. (in City)    Out-of-City (Contractor)

**No. of Employees Working in the City (including owner):** \_\_\_\_\_

**Business Square Footage:** \_\_\_\_\_  
(In-City businesses only, excluding home occupations)

**Special Classifications:**

Home Occupation Business    Family Daycare Home

Pawnbroker\*    Secondhand Dealer\*

Public/Teen Dance

Non-profit – Provide copy of non-profit ID and ID # \_\_\_\_\_

Amusement Game Device\* - How many: \_\_\_\_\_

**\*Requires Special Application – contact Community Development at (425) 806.6400**

**CALCULATE LICENSE FEE DUE BELOW**

See Fee Schedule for Business Categories and Fees

**Category A - Employee Fee** \$ \_\_\_\_\_

**Category B - Business Type Fee** \$ \_\_\_\_\_

**Category C - Square Footage Fee** \$ \_\_\_\_\_

**Special Classification Fee** \$ \_\_\_\_\_

**Change Owner and/or Location Fee** \$ \_\_\_\_\_

**Other Fees (specify)** \$ \_\_\_\_\_

**TOTAL AMOUNT DUE** \$ \_\_\_\_\_

**Return completed application to above address with a check made payable to the City of Bothell. If paying by credit card, complete portion below:**

VISA    MasterCard   Card No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**Cardholder's Signature:** \_\_\_\_\_

**Attestation and Declaration**

I/We hereby attest that I/we have not been convicted of a crime which related directly to the business for which this license is sought, suffered a civil judgment based upon fraud, misrepresentation, violation of the Washington Consumer Protection Act or similar State or Federal statutes, or any other judgment, cease and desist order or consent decree relating to business activities.

I/We the undersigned, declare under the penalties of perjury and the denial of a license or revocation of any license granted, that I/we am/are the applicant or authorized representative (s) of the business making this application and that the answers contained, including any accompanying information, have been examined by me/us and that the information set forth is true, correct and complete. I/we understand the place of business must comply with all Federal, State and local codes and ordinances.

Signature of Applicant (s): \_\_\_\_\_ Date: \_\_\_\_\_

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

Application Prepared By: \_\_\_\_\_ Date: \_\_\_\_\_

**For City Use Only**

Business License No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

License Fee: \$ \_\_\_\_\_ Total Amt Paid: \$ \_\_\_\_\_

Date Paid \_\_\_\_\_ Cash  / Check  /Credit  Receipt No.: \_\_\_\_\_

Business Type Code: \_\_\_\_\_ County: \_\_\_\_\_

**City Approvals**

	Sign	Date
Code Compliance	_____	_____
Zoning	_____	_____
Fire	_____	_____
Police	_____	_____

The City's acceptance of your application and fee does not constitute approval or authorization to conduct business. An incomplete application may delay the processing of your license. Be sure to review your application for accuracy and completeness prior to submittal. Please print or type clearly.

Return the completed application with appropriate fee to:      New Business Licenses  
City of Bothell Community Development  
18415 101<sup>st</sup> Ave NE  
Bothell, WA 98011

If you have questions regarding business licensing, please contact:      Community Development  
Phone: 425.806.6100  
Email: BusinessLicenses@bothellwa.gov

## 2020 Business License Fee Schedule

**Contractors Please Note:**

In-City Contractors: Pay the appropriate fees from Categories A, B, and C.

Out-of-City Contractors: Pay fees from Category A and B only.

Locate the appropriate fees from each of the following categories and enter on application form

### CATEGORY A – Number of Employees

	No. of Employees	License Fee	No. of Employees	License Fee
*Business owner counts as one employee.	1-2	\$32.00	51-75	\$550.00
	3-10	\$82.00	76-100	\$734.00
	11-25	\$170.00	101+	\$734.00
	26-50	\$366.00	+ \$14.00 for each over 100	

### CATEGORY B – Type of Business

Code	Business Type	Description	Fee
100	Public Assembly	Public recreation, funeral homes, clubs, restaurants, food service, and theater.	\$80.00
150	Non-Profit Organization	An enterprise, without private profit for a public, charitable, educational, literary, or fraternal purpose, when its not-for-profit status is demonstrated through Internal Revenue Service Documentation.	No fees, registration required
200	Educational Use	Various types of training schools.	\$80.00
300	Institutional Use	Health care facilities of various types. Adult daycare centers and adult family homes.	\$80.00
400	Residential	Business where primary use is residential. Includes hotels, motels, and lodging houses. For home offices, see "Store, Office" below.	\$61.00
401	Apartments	All apartments are included.	\$306.00
*500	Store, Office	Business involved in the sale, service, or maintenance of products.	\$42.00
501	Contractors – in-City	Contractors who maintain a home office within the City limits, but do not have employees working at that home office location.	\$42.00
502	Contractors – out of City	Contractors based outside the City limit	\$42.00
503	Gross Proceeds Less Than \$1,000 Per Month	Business whose gross monthly proceeds are less than \$1,000.	No fees, registration required
506	Home Occupation Business	Home-based business where the primary use of the dwelling is residential. Maximum of 2 workers, one of whom must reside in that home.	\$42.00
507	Family Daycare Home	State-licensed daycare provider who regularly provides daycare for not more than 12 children in the provider's home in the family living quarters.	\$22.00 (Category B only)
600	Basic Industry, Utility	Research/laboratory, military/defense, communications.	\$98.00
700	Manufacturing Use	Manufacturing/assembling of goods.	\$98.00
800	Storage Use	All types, except hazardous waste.	\$80.00

### CATEGORY C – Square Footage

Square Footage	License Fee	Square Footage	License Fee
Less than 3,000	\$0	17,001 to 20,000	\$2,299.00
3,001 to 5,000	\$63.00	20,001 to 50,000	\$2,774.00
5,001 to 10,000	\$96.00	Greater than 50,000	\$4,819.00
10,001 to 15,000	\$1,489.00	Greater than 50,000	\$3,213.00 (Apts only)
15,001 to 17,000	\$2,049.00		

### SPECIAL CLASSIFICATIONS

508	Amusement Game Device	Amusement game device located within a store, office, public assembly business, etc.	\$52.00 per game device
509	Secondhand Dealer	Resale of used goods.	\$52.00
510	Public/Teen Dance	Any dance that is open to the public and which is conducted for a profit, either direct or indirect; or that requires a monetary payment or contribution from the persons admitted.	\$559.00
511	Pawnbroker	Receives goods, wares, or merchandise for repayment of security of any money loaned; or loans money on deposit of personal property; or publicly displays sign indicating money to loan on personal property on deposits or pledge.	\$190.00

### OTHER FEES

Change of Business Location	\$32.00	Change of Business Owner	\$32.00	Duplicate License	\$11.00
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**EMERGENCY CONTACT INFORMATION**

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

To better serve you, the City of Bothell Police Department requires updated emergency contact information for your business. Please take a moment to fill out this form completely and return it with your Business License Application. Include any relevant information that might assist police should an emergency arise at your business.

**COMMERCIAL BUSINESS INFORMATION:**

NEW BUSINESS  UPDATED INFORMATION

BUSINESS NAME: \_\_\_\_\_ BUSINESS OWNER: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ OWNER PHONE: \_\_\_\_\_

BUSINESS HOURS: \_\_\_\_\_ OWNER EMAIL: \_\_\_\_\_

BUSINESS GATE CODE: \_\_\_\_\_

KNOX BOX LOCATION: \_\_\_\_\_

DOES BUSINESS HAVE VIDEO SURVEILLANCE? YES  NO

ALARM SYSTEM: Yes  No

ALARM TYPE:  BURGLARY  FIRE  PANIC

MONITORED: Yes  No

AUDIBLE:  SILENT:

MONITORED BY: \_\_\_\_\_ PHONE: \_\_\_\_\_

**EMERGENCY CONTACT #1**

**EMERGENCY CONTACT #2**

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_

ALTERNATE PHONE: \_\_\_\_\_

ALTERNATE PHONE: \_\_\_\_\_

**COMMENTS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**POLICE USE ONLY**

**FORWARD HARD COPY TO RECORDS**

CAD/RMS DATA ENTRY (Initials)

\_\_\_\_\_ SERIAL # \_\_\_\_\_ DATE \_\_\_\_\_

MAP NUMBER \_\_\_\_\_

BEAT \_\_\_\_\_ SECTOR \_\_\_\_\_