



# Panoram Premise License Application

Date of Application: \_\_\_\_\_

WA State UBI # \_\_\_\_\_

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

All Licenses expire annually.

Business License (Renewal) Fees: \$1,125.00

➤ Attach a sketch and layout of the premise including devise layout.

▲ This specific license applies to one business in one location as identified in the section below

## Applicant Information

Name of individual applying for the License: \_\_\_\_\_

Home Address of applicant: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

List all Aliases: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State of Driver's License: \_\_\_\_\_ Expires \_\_\_\_\_

## Business Information

Business Name:	Business Phone #:
Business Address:	
City/State/Zip	Business is: Individual ___ Partnership ___ Corporation ___ Other _____
Description of the business activities at your premises during the year for which this license application is for , hours of operation and number of devices:	

## Owners Information:

Name:	Date of Birth:
Street Address:	SS #:
City/State/Zip	Phone #:
Name:	Date of Birth:
Street Address:	SS #:

City/State/Zip	Phone #:
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*(Continued from Page #1)*

<p><b>I certify</b> that the information contained herein is correct. I understand that any untrue statement is cause for revocation of this application and the subsequent License.</p>          <p>Applicant Signature: _____</p> <p>Print Name: _____</p> <p>Date Signed: _____</p>	<p><b>CORPORATIONS AND PARTNERSHIPS:</b></p> <p>Please identify the <b>person/agent</b> responsible for business operations:</p> <p>Name: _____</p>   <p>Address: _____</p>   <p>Phone: _____</p> <p>DOB: _____</p>	<p><b>Finance Office Use Only:</b></p> <p><b>Paid By:</b> <input type="checkbox"/> Cash <input type="checkbox"/> Check, Check # _____</p> <p>Cash/Check Receipt # _____</p> <p>Date the License was issued to the applicant: _____</p> <hr/> <p><input type="checkbox"/> Planning:      <input type="checkbox"/> Police: <input type="checkbox"/> Fire:</p> <p><input type="checkbox"/> Building:      <input type="checkbox"/> Engineering:</p> <hr/> <p>Received By: _____</p>
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**Criminal convictions, locations, and approximate dates:**

Have you been convicted of or found to have committed any violation of any law, ordinance or regulation related to or connected with the type of license for which you are applying?

Crime Convicted Of:	Location:	Date:

*(Continued on page #3)*

NOTARY:

**State of Washington  
County of Pierce**

**I** Certify that I know or have satisfactory evidence that \_\_\_\_\_ is the person who appeared before me and said person acknowledged that he/she signed this instrument and acknowledged it to be his/her free and voluntary act for the use and purposes mentioned in the instrument.

**Dated:** \_\_\_\_\_

**Witness my hand and official seal:**

\_\_\_\_\_

**Signature:**

\_\_\_\_\_

**Name as commissioned:**

\_\_\_\_\_

**Title:**

\_\_\_\_\_

**My appointment expires:**

\_\_\_\_\_

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**Police Service Use Only:**

Fingerprinted By: \_\_\_\_\_

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

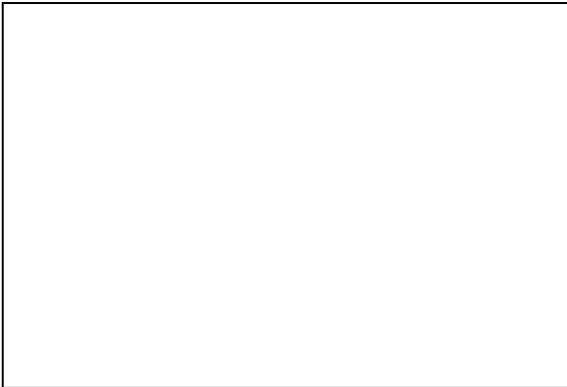


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