



TEMPORARY BUSINESS LICENSE APPLICATION

6000 MAIN ST. SW ♦ LAKEWOOD, WA 98499
Phone: (253) 512-2261

BUSINESS LICENSE - ZONING REVIEW CHECKLIST: (FOR OFFICIAL USE ONLY)

Tax Parcel: _____ Zone: _____

Zoning Use Type: _____

TI Required: Yes No

NAICS Code(s): _____

Swap Meet Applications must be submitted in person at City Hall: Monday – Friday 9:00am – 1:00pm, license will be issued at 4pm the same day for pick-up at reception desk**Additional review is required for automotive and food related applications

Business Name/Applicant:		UBI #:
Business/Location Address :		Phone#:
Mailing Address if different:		email:
Provide a description of the general type of goods, wares, merchandise or food proposed to be sold:		
Dates for which the license is sought:		
Provide vehicle license numbers of all vehicles that will be used to conduct business:		
Number of employees:	Total square footage of space:	
Previous Tenant (provide as applicable):		
LEASING AGENT/AGENCY:		Phone:
Mailing Address:		email:

Other licensing information (provide as applicable):	
State Contractor License #: _____	Expiration Date: _____
IRS 501c (3,4) registration #: _____	FEIN #: _____
Liquor Control Board License #: _____	Gambling License #: _____

Owner/Legal Entity information (provide as applicable):				
Sole Proprietor <input type="checkbox"/>	Partnership <input type="checkbox"/>	Corporation <input type="checkbox"/>	Limited Liability <input type="checkbox"/>	Non-Profit <input type="checkbox"/>

Sole Proprietor/Partnership:	Corporation, LLC or Non-Profit
Owner: _____	Corp/LLC name: _____
Title: _____	Officer/Agent: _____
Address: _____	Title: _____
Phone: _____ email: _____	Address: _____
Owner: _____	Phone: _____ email: _____
Title: _____	Corp/LLC UBI (if different): _____
Address: _____	
Phone: _____ email: _____	

Please Answer All of the Questions Below	
Is your business legal under local, state, and federal law?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you intend to erect, construct, install or alter a permanent sign for your business? (sign permit may be required)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will you be doing any interior or exterior improvements or remodeling work? (building permit may be required)	Yes <input type="checkbox"/> No <input type="checkbox"/>

Please Answer All of the Questions Below

Will any portion of the business be conducted for a house or apartment? <i>(a home occupation permit may be required)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you own/ manage 8 or more residential lease/rental units in the City of Lakewood? <i>(rental housing app required)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will your business include any automotive activities? <i>(supplement automotive checklist is required)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will you be soliciting door to door, selling or demonstrating, polling, collecting charitable donations or advertising? <i>(a solicitor application is required)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will your business involve any sales or service of food or alcohol? <i>(if so, please contact Tacoma/Pierce Co. Health Dept.)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will your business involve any sales, testing, production or processing of marijuana?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will your business include or permit public dances on the premises? <i>(A cabaret or dance hall application is required)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will your business be engaged in pawn broking activities, second hand sales, or second hand metals? <i>(If yes, then the business is subject to leadsonline.com. Please review second hand sales tip sheet).</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will your business operate for short term periods or in a transitory nature?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will your business operate in an outdoor location at a flea market?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Will your business operate as part of a carnival or circus?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Submittal Requirements

1. A valid/open UBI # registered with the State of Washington Department of Revenue.
2. Provide a valid government issued form of photo identification, such as a state issued driver's license, identification card or passport.
3. If the business will be conducted on a property not owned by the applicant, provide a notarized statement from the property owner with the following:
 - Statement explaining the method of trash and litter disposal proposed
 - A drawing to scale or Map (not greater than 50 feet per inch or less than 10 feet per inch) that shows the following:
 - The portion of the property to be occupied by the business.
 - The portion of the property to be used for automobile parking and the number of automobiles proposed to be accommodated.
 - The location of driveways that provide ingress/egress to the property.
 - The location and use of existing buildings and structures on the property.
 - The proposed placement of any lighting or signage, including those located on vehicles or other nonpermanent structures used in the business.
 - Location and description of any equipment or devices that will generate noise.

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(s) or authorized representative(s) of the firm 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 authorize the City, its agents and employees to investigate and confirm any statements set forth in this application. I also understand that I am responsible for notifying the business License Division, in writing, of any change in location or mailing address within ten days of the change. All licenses are nontransferable. I understand my place of business must comply with all federal, state, and local codes and ordinances. I further agree to hold harmless the City of Lakewood as to any claim (including costs, expenses and attorney's fees incurred in investigation of such claim) which may be made by any person, including the undersigned, and filed against the City of Lakewood, but only where such claim arises out of the reliance of the City, including its officers and employees, upon the accuracy of the information provided to the City as part of this application.

Signature: _____ Date: _____

Signature: _____ Date: _____