

# Town of Friday Harbor

PO Box 219 / Friday Harbor / WA / 98250

(360) 378-2810 / fax (360) 378-5339 / www.fridayharbor.org

## Business License Application

*Fee for full license year: \$42 (Beginning April 1<sup>st</sup> & commencing through March 31<sup>st</sup>).*

*Fee for partial year: \$21 (Beginning on or after October 1<sup>st</sup> & commencing through March 31<sup>st</sup>)*

**Town accepts cash or check made payable to the Town of Friday Harbor (no debit or credit cards accepted.)**

Application date:	Parcel owner:	Business location tax parcel number:	
Applicant name:		Business phone number(s):	
Name of business:  <i>(As it is registered with the State of Washington.)</i>		Alternative phone number:	
		Business email (if available):	
Business mailing address:		Business website (if available):	
Street address (or physical location of business):		Length of time at present location:	
List other persons having a proprietary interest in this business:			
Washington State Dept. of Revenue Registration Number/UBI# <i>(Town may not process Business License Applications <u>without</u> a valid UBI):</i>			
Description of business to be carried on within the Town:			
<b>NOTICE: Licenses are valid April 1<sup>st</sup> and expire March 31<sup>th</sup> of the ensuing year. All licenses that are not renewed by March 31<sup>th</sup> shall be inactivated. See Chapter 5 FHMC for business licensing regulations. Businesses who fail to renew their license prior to its expiration shall be considered unlicensed, and subject to Class IV civil penalties if operating in Town without obtaining a license. Per FHMC Chapter 5.04, Town shall issue a renewal notices March 1<sup>st</sup>.</b>			
By signing below, I understand that issuance of a business license pursuant to this application shall not constitute an assurance or representation that the business, or its location, complies with applicable local, state or federal laws. I further understand that it is the Applicant's responsibility to contact agencies, including Town, SJC and the State, to insure full compliance with all such laws, including local ordinances and regulations.			
APPLICANT SIGNATURE _____		DATE _____	
Town of Friday Harbor Use Only		001.000.000.321.90.00.00	
Zoned:	Zoning Approved / Denied by:	Water/Sewer Coded:	Utility Codes Verified by:
Application: Approved / Denied by:		Amount Paid \$	License # issued:

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**Supplemental Business License Information**

(This page goes to the Community Development Department, please fill out entirely)

Name of Business Owner: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Business Owner Address: \_\_\_\_\_

Name of Business: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Address of Business: \_\_\_\_\_ Tax Parcel: \_\_\_\_\_

Building Owner or Leasing Agency: \_\_\_\_\_

Mailing Address of Building Owner: \_\_\_\_\_

**Yes**  **No**  **N/A**  Will you be doing any repairs, alterations, remodeling, or demolitions to the existing structure?

If yes, please explain below.

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

**Yes**  **No**  **N/A**  Will you be installing any new mechanical fixtures or any new plumbing fixtures? If yes, a permit is required as well as a Water Department Checklist. Please obtain applications and checklist from the Community Development Department or download these forms at [www.fridayharbor.org](http://www.fridayharbor.org).

**Yes**  **No**  **N/A**  Is the land use zoning appropriate for your business location? Please see the Town's Land Use Administrator if questions.

**Yes**  **No**  **N/A**  Does your new business require a new sign or want a mural? If yes, please contact the Community Development Department at 360/378-2810 or download your sign/mural permit application at [www.fridayharbor.org](http://www.fridayharbor.org).

**Yes**  **No**  **N/A**  If no, do you plan on displaying a sign/mural in the future?

**Yes**  **No**  **N/A**  Do you plan on using the existing sign/mural located on the premises of your business? (Please be aware that a new sign permit is required for alterations of existing signs.)

**Yes**  **No**  **N/A**  Have you obtained a fire and life safety inspection from the Town Fire Marshal. If so, please attach a copy of that inspection.

**Yes**  **No**  **N/A**  When is your expected opening date? \_\_\_\_\_

Signature

Date