



BUSINESS LICENSE APPLICATION

Mail: PO Box 8995, Vancouver, WA 98668-8995
Drop Off: Esther Short Building, 610 Esther Street, Vancouver, WA 98660
Questions: www.cityofvancouver.us/businesslicense or 360-619-1010 ext 3

THIS LICENSE IS REQUIRED UNDER VANCOUVER MUNICIPAL CODE (VMC) 5.04.

PLEASE FILL IN REQUIRED FEES TO BE PAID			
Business License Fees (complete & attach <i>Surcharge Worksheet</i>)			
= \$125.00	+ \$ _____	= \$ _____	
BASE FEE	SURCHARGE	TOTAL BUS LIC FEE	
Home Occupation Permit Review Fee			
(1-TIME FEE, IF APPLICABLE*) = \$114.51 \$ _____			
TOTAL FEES			\$ _____

Note: For businesses operating in the City limits, issuance of a Business License or a Determination of Exemption does not relieve the business from complying with all applicable City Building, Fire, & Zoning codes. *If the business is conducted from a residence in the City, the applicant must complete both sides of this application, and pay the one-time fee noted above for a Home Occupation Permit review by Development Review Services (DRS). This fee is in addition to any required license fees. **Contact DRS, at 360-487-7803, re: Building, Fire, & Zoning codes, or to verify if a Home Occupation Permit is required.**

BUSINESS NAME: _____	BUSINESS PHONE NO: _____
DBA (DOING BUSINESS AS) BUSINESS NAME -- IF DIFFERENT FROM ABOVE: _____	FAX NO: _____
FIRST DATE OF CONDUCTING BUSINESS IN VANCOUVER CITY LIMITS: _____	WA UBI NO: _____

PHYSICAL ADDRESS (NO PO OR MAILBOX ADDRESSES) **Note:** If physical address is inside City limits, you must also complete page 2 of this application.

STREET: CITY: _____ STATE: _____ ZIP: _____

MAILING ADDRESS -- IF DIFFERENT FROM ABOVE -- (PO OR MAILBOX ADDRESSES ARE ACCEPTABLE):

STREET: CITY: _____ STATE: _____ ZIP: _____

E-MAIL ADDRESS: _____

TYPE OF BUSINESS AND A BRIEF DESCRIPTION OF BUSINESS ACTIVITY PERFORMED:

AND CHECK AT LEAST ONE CATEGORY:

RETAIL MANUFACTURING WHOLESALE SERVICE CONTRACTOR OTHER (DESCRIBE ABOVE)

PLEASE INDICATE **OWNERSHIP STATUS:** SOLE PROPRIETOR PARTNERSHIP CORPORATION LLC

LIST INDIVIDUAL OWNERS, PARTNERS, CORPORATE OFFICERS OR MEMBERS AND THEIR TITLES:

NAME/TITLE: _____ BUSINESS OR RESIDENTIAL ADDRESS: _____ PHONE NUMBER: _____

ARE YOU STARTING A NEW BUSINESS, LICENSING AN EXISTING BUSINESS, PURCHASING AN EXISTING BUSINESS, OR OTHER?

NEW BUSINESS EXISTING BUSINESS PURCHASING BUSINESS OTHER _____

I hereby declare under penalty of perjury of the laws of the State of Washington that the information contained in this application is accurate and complete.

APPLICANT SIGNATURE: _____ **TITLE:** _____ **DATE:** _____

FOR OFFICE USE ONLY

OUTSIDE CITY LIMITS INSIDE CITY LIMITS

CASE #: _____ **ZONE:** _____ **ACCEPTED BY:** _____

FOR BUSINESSES LOCATED WITHIN THE CITY LIMITS OF VANCOUVER

** Issuance of the business license does not relieve you of the requirements of all applicable City codes.*

WASTEWATER DISCHARGE

According to the City of Vancouver's Pretreatment Ordinance (VMC 14.10), local businesses and industries are required to inform the City of Vancouver of all process discharges to the sewer system. Besides domestic (sanitary) discharges, will there be discharges to the sewer from business or industrial processes at this site? YES NO

WATER RESOURCES PROTECTION

As stated in the Water Resources Protection Ordinance (VMC 14.26), a business or industry that manages hazardous materials at a facility will need to implement special handling practices to protect surface and ground water resources.

Will you be storing or managing chemicals or petroleum products at this site? YES NO
Does your facility have indoor floor drains other than in bathroom facilities? YES NO

ZONING INFORMATION

- 1. How many employees in addition to the owner will be employed at this address? _____
- 2. Will proposed business involve the use of any toxic, flammable, poisonous, or potentially hazardous material? YES NO
- 3. Will the business require a new sign and/or modification of an existing sign? YES NO
- 4. Will the proposed business require any interior and/or exterior modifications? YES NO
- 5. If another business previously occupied the space of the proposed business, please specify the type of the previous business. _____ UNKNOWN
- 6. Is the proposed location of your business your home in the city limits of Vancouver? * YES* NO

****IF YES, READ AND SIGN THE HOME OCCUPATION LETTER OF COMPLIANCE SECTION BELOW.***

HOME-BASED BUSINESSES IN THE CITY LIMITS OF VANCOUVER ONLY

HOME OCCUPATION LETTER OF COMPLIANCE

You have applied for a license to operate a business in a zone that does not permit an outright commercial activity. In this zone you may operate a business only under the following conditions allowed through Vancouver Zoning Ordinance 20.860.

A Home Occupation may be operated where allowed if the following conditions are continuously complied with:

- 1. Home occupation must be clearly subordinate to the residential use of the property and will not be detrimental or disruptive in terms of appearance or operation to neighboring properties.
- 2. A current and valid City of Vancouver business license is maintained.
- 3. Not more than 25% of the combined floor space of main and accessory buildings or 800 sq. ft. (whichever is less) may be used for business activities. Please submit floor plan of home indicating area to be used for home occupation.
- 4. One nonresident employee is permitted. The person providing the business must reside within the dwelling.
- 5. Retail sales are prohibited except when the product to be sold is clearly incidental to the services authorized.
- 6. No signs in residential zones.
- 7. The combined total number of customers, employees, visitors and delivery vehicles associated with home occupations shall be limited to no more than 6 per day.
- 8. No commercial vehicles allowed associated with home occupations.
- 9. All other criteria outlined in VMC 20.860.

I have read the above and agree to comply with the requirements.

BUSINESS LOCATION: _____

APPLICANT NAME (PRINT): _____

APPLICANT SIGNATURE: _____ DATE: _____

PLANNER REVIEWED: _____ DATÒ: _____