BUSINESS LICENSE APPLICATION

APPROVED YES ☐ NO ☐
OFFICIAL USE ONLY

PERMIT NUMBER 2025 -

DATE / /

FOR ANNUAL REVENUE LESS THAN $ 2,000

OFFICIAL USE ONLY

☐ $ 50 BUSINESS LICENSE FEE

DATE RECEIVED _____ RECEIVED BY _____

DATE PROCESSED _____ RECIEVED BY _____

INSPECTION BY _____ DATE DATE _____

APPLICATION FEES / PENALTIES

LICENSE $ _____ PENALTIES $ _____ INSPECTION $ _____

TOTAL $ _____ RECEIPT # _____ DATE _____

COMMENTS

CONTRACTOR INFORMATION

CONTRACTOR _____ PHONE _____

CONTRACTOR ADDRESS _____ EMAIL _____

CITY BUSINESS LICENSE # _____ WAINS# _____

WA CONTRACTOR LICENSE # _____ EXPIRATION DATE / /

☐ LLC ☐ SOL PROPRIETORSHIP ☐ NON-PROFIT ☐ VENDOR FOOD ☐ CRAFTERS / VENDOR NON-FOOD

BUSINESS INFORMATION

LEGAL BUSINESS NAME	BUSINESS TYPE	BUSINESS PHONE ( ) -
PHYSICAL ADDRESS	MAILING ADDRESS	EMAIL
BUSINESS OWNER / NAME OF APPLICANT	OWNER ADDRESS	EMAIL
STATE OF INCORPORATION	L&I LICENSE #	BUSINESS UBI #

ACQUISITION OF EXISTING BUSINESS

FORMER BUSINESS NAME	DATE ACQUIRED

License must be paid by close of business January 31st. A penalty of $50. Will be added to renewal if paid Feb 1 – March 31. Payments made April 1 and beyond will have a fee of $100. Per month added to license costs. Penalties will be strictly enforced.

By my signature, I certify under penalty of perjury that the information above is correct to the best of my knowledge and belief, and per SLMC 5.06.180, I consent to the inspection of my premises at reasonable times and in a reasonable manner as a condition of the issuance of this license.

X APPLICANT SIGNATURE	X TITLE	DATE

Return Application to:

City Of Soap Lake 239 2nd Ave SE, PO Box 1270, Soap Lake WA 98851 website@soaplakewa.gov

www.soaplakewa.gov