

Business Tax Division
 2930 Wetmore Avenue
 Everett, WA 98201
 (425) 257-8610
 Fax: (425) 257-8741

CITY OF EVERETT

BUSINESS TAX NUMBER APPLICATION

(Business License)



FILE APPLICATION AND FEE WITH BUSINESS TAX DIVISION, CITY HALL

1	FIRM NAME		BUSINESS PHONE		
	BUSINESS LOCATION (Street Number, City, State, Apt., Suite)		email address	ZIP CODE	
	MAILING ADDRESS (Street Number, City, State, Apt., Suite)		ZIP CODE		
2	REASON FOR FILING THIS APPLICATION	NAME, FIRM NAME & ADDRESS OF PREVIOUS OWNER		ACCT. NUMBER	
	<input type="checkbox"/> Incorporating Existing Business <input type="checkbox"/> Change of Ownership of Existing Business <input type="checkbox"/> Starting New Business <input type="checkbox"/> Change in Corp. Entity				
3	DATE OF FIRST BUSINESS ACTIVITY MONTH / DAY / YEAR		FEIN (Fed. Emp. ID No.)	UBI (16-digit UBI required)	
	IN EVERETT BY THIS ENTITY				
4	NATURE OF BUSINESS	<input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Manufacturing <input type="checkbox"/> Service	IF CONSTRUCTION, SPECIFY TYPE <input type="checkbox"/> Residential <input type="checkbox"/> Highway <input type="checkbox"/> Commercial <input type="checkbox"/> Speculative <input type="checkbox"/> OTHER, PLEASE SPECIFY		
	DESCRIBE IN DETAIL PRINCIPAL PRODUCT OR SERVICE RENDERED IN EVERETT				
5	<input type="checkbox"/> INDIVIDUAL	OWNER'S LAST NAME	FIRST	MIDDLE	
		SPOUSE	FIRST	MIDDLE	
		OPERATED BY HUSBAND AND WIFE? <input type="checkbox"/> YES <input type="checkbox"/> NO			
	<input type="checkbox"/> PARTNERSHIP	FIRST PARTNER'S LAST NAME	FIRST	MIDDLE	
		SECOND PARTNER'S LAST NAME	FIRST	MIDDLE	
		THIRD PARTNER'S LAST NAME*	FIRST	MIDDLE	
	<input type="checkbox"/> CORPORATION OR LLC	FULL LEGAL NAME OF CORPORATION			
		NAMES OF CORPORATE OFFICERS	HOME ADDRESS	CITY, STATE	PHONE
		Pres.			
		V. Pres.			
Secretary					
	Treasurer				
6	<p>The undersigned certifies that the above information is complete, true and accurate to the best of his knowledge. Further, the undersigned certifies that he/she understands that a business tax number (business license) is issued for the express purpose of taxation and shall not be construed as a license or permit to operate business in violation of any City of Everett ordinance, rule or regulation. It is the undersigned's sole responsibility to ensure compliance with all applicable City ordinances, rules and regulations prior to conducting business in the City of Everett.</p>				
	APPLICATION SIGNATURE	TITLE	DATE SIGNED		
		HOME ADDRESS	HOME PHONE		
7	FOR OFFICE USE ONLY	LICENSE ISSUED	LOCATION CODE	NAIC NUMBER	B&O ACCOUNT NUMBER
	TR	SH			

*(ATTACH LIST FOR ADDITIONAL PARTNERS)