

AUDITOR

BUSINESS LICENSE APPLICATION FOR UNINCORPORATED THURSTON COUNTY

Business name:				Physical Address of Business:					
Contact name:				City, State zip:					
Address:				Business phone: ()					
City, State	Zip:			Home Occupation: yes no Total No. of Employees:					
TYPE OF BUSINESS			Flea Market	Itinerant_		Junk/Secondhar Antique	Auctio	Hawker/ Auctioneer	
	Erotic Dancehall			Firework Sales		Peddler	Public	Massage Parlour/ Public Bathhouse	
	Erotic Ent Dancer_	ertainer/	Pet Shop	Fireworks	S			arlour/Bathhouse ttendant	
Detailed description of business:									
Type of ownership: Please mark one		Individual:	Partnership	:		Corporation:	Non- Profit:	LLC:	
List Owners, Partners or Officers:		Title:	Residence	Address		City	State, zip	Residence phone:	
Business Ic Thurston Cou	unincorporate No	d Contractor	's License l	nse Number: Washington State t			n State UBI #		
Do you store flammable or hazardous materia If yes, state type and quantity:				erials? Yes No			Emergency Notify:		
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ALL BUSINESS SIGNS IN UNINCORPORATED THURSTON COUNTY MUST BE APPROVED BY THE PLANNING DEPARTMENT									
NOTE: Additional County permits may be necessary before you can commence business. If you change your address, location, or nature of business, or if you are no longer doing business in unincorporated Thurston county, you must notify us immediately.									
FEE MUST BE PAID WITH APPLICATION Make checks payable to Thurston County Auditor					I certify that the above information is correct Signed by				
New license FEE:Other						o.ig.nou by			
					Office/Title		Date		
FOR OFFICIAL USE ONLY									
Amount Paid \$ Date Issued By					Date Business Closed			License Number	
Comments:									

EROTIC DANCEHALL SUPPLEMENT

Thurston County Code 6.42

FOR DEFINITIONS OF EROTIC DANCEHALL, SEE COUNTY CODE 6.42.015

FEES (DUE UPON APPLICATION):

• \$50.00 annual license fee, non-refundable

EXPIRATION:

• December 31st of the year for which the license is issued or renewed. Renewals may not be purchased prior to September for the following calendar year.

This license is separate from the Entertainer's License. Each Entertainer must obtain an Entertainer's License pursuant to County Code 6.42.050.

Within **five** days of receipt of the completed application, a copy will be given to the Thurston County Sheriff's, Building, and Planning Departments. License will be issued within **twenty** days of application, pending approval from the Building and Planning Departments. You will receive an explanation if your application has not been approved.

You must contact the **Washington State Department of Licensing** to determine if a Master Business License is required. The state will also have a list of other government agencies you may need to contact for other permits and/or licenses. You may contact them in one of the following ways:

Phone: (360) 664-1400 Internet: www.dol.wa.gov In person: 405 Black Lake BLVD BLDG #2 Olympia, WA

You may also need to contact the following:

• Thurston County Assessor – (360) 786-5410

The following information is required if your business structure is a sole proprietorship, partnership or corporation:

<u>Sole proprietorship</u>: the name, address, telephone number and principal occupation of the sole proprietor

<u>Partnership</u>: the name, address, telephone number, principal occupation and respective ownership shares of each partner, whether general, limited or silent

<u>Corporation</u>: the corporate name, a copy of the articles of incorporation, and the name, address, telephone number and principal occupation of every officer and director of the corporation, and every shareholder having more than five percent of the outstanding shares of the corporation

Please complete the following – incomplete applications will not be accepted.

Business Structure (see page one for description and additional information required) Check one:Sole ProprietorshipPartnershipCorporation
Information about the business: Business Name: Business Address: Mailing Address (if different): Business Phone Number: Description of the nature of the business (use back of paper if needed):
Information required for the applicant, managing agent or other agents of the business (if additional space is needed, please type a list and attach to this application): Name: Home Address: Home Phone Number: Principal Occupation: Age at time of Application: Name, address, phone number and principal occupation of every person, partnership or corporation having any interest in the real property utilized or to be utilized by the business:
Has the applicant or any person required to be named by this application ever been convicted of or forfeited bail for any crime, excluding minor traffic offenses? YES/NO If yes, list the person involved, the charge, date of court and disposition of the charge:
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occupancy, building permit or other certificate or permit required by law, and it does not relieve the licensee of the responsibility to have such permits or certificates at all times and to comply with all laws affecting the business for which this license is issued. _____, certify that all the data and statements in this application are true and correct, I have read the Thurston County Code 6.42, and will abide by the codes. (A copy will be furnished upon request) Signature of Applicant Date signed State of Washington County of Thurston I certify that I know or have satisfactory evidence that _____ is the person who appeared before me, and said person acknowledged that (he/she) signed this instrument. Dated:_____ Signature and title My appointment expires_____

This license applies only to the premises indicated herein and authorizes the licensee

to operate in a lawful manner only; it is not a substitute for any certificate of

A THURSTON COUNTY BUSINESS LICENSE APPLICATION MUST ACCOMPANY THIS SUPPLEMENT