

City of Cle Elum
119 West First Street
Cle Elum, WA 98922



Telephone: (509) 674-2262
Fax: (509) 674-4097
www.cityofcleelum.com

Business License No. _____

CITY OF CLE ELUM BUSINESS LICENSE APPLICATION

Municipal Code 5.02.010 requires that any person, firm or corporation must obtain a business license before conducting any business or profession within the City Limits. This includes those persons, firms or corporations whose primary place of business is outside of the City Limits, but whose business or profession is conducted within the City Limits.

Date of Application: _____

Name of Business: _____

Local Physical Address: (If applicable) _____

Mailing Address: _____

Telephone Number: _____

Owner Information:

Name: _____ Title: _____

Home Address: _____ Phone #: _____

Name: _____ Title: _____

Home Address: _____ Phone #: _____

Check any that apply:

Corporation _____ Partnership _____ Sole Proprietor _____ Association _____

If Corporation, incorporated under laws of what State: _____

UBI No. _____

DESCRIPTION OF BUSINESS: _____

CONTRACTORS ONLY: Annual Business License \$ 60.00

State license No. _____ Expiration Date: _____

Explain types of general or specialty contracting work performed: _____

CITY OF CLE ELUM BUSINESS LICENSE APPLICATION CONTINUED

Number of Employees (including owners) _____

Home Occupation: Yes___ No___ If yes, please give detailed description below:

Does the building have an automatic sprinkler or fire alarm system? _____

If YES please describe system: _____

Will hazardous material or flammable liquid or gas be stored? Yes_____ No_____

Square footage and seating capacity, if applicable: _____

Off Street Parking? Yes_____ No_____

SCHEDULE OF FEES (Calendar Year or any portion thereof): See Attached

Please make check payable to: City of Cle Elum

I certify under penalty of perjury that the information above is correct, to my best knowledge and belief:

Signature: _____

Title: _____

Signature: _____

Title: _____

This application is for the sole purpose of obtaining a license to conduct business in Cle Elum and does not review or authorize its location of operation for compliance with other city codes, including building, zoning and sign requirements. Anyone establishing a business is urged to contact City Hall regarding these requirements.

*****IMPORTANT: The following page of this application is required information that we will provide to the Police Department in case of an emergency, both during and after business hours. Please provide the information requested as completely as possible. If you change your business address, nature of business, or if you are no longer doing business in Cle Elum, please contact City Hall at 509-674-2262.

OFFICIAL USE ONLY

AMOUNT

Business License \$ _____

Other License \$ _____

Penalty \$ _____

Total \$ _____

Date Received _____

By _____

Receipt Number _____

Check Number _____

CITY OF CLE ELUM BUSINESS LICENSE APPLICATION CONTINUED

**BUSINESS CONTACT INFORMATION
FOR CLE ELUM POLICE DEPARTMENT**

Please provide the following contact information for your business so that, in the event of an emergency, especially after hours, the Cle Elum Police Department knows who to contact. If this information changes during the course of the year, please contact Cle Elum City Hall to update this form.

Business Name: _____

Business Address: _____

Business Phone: _____

Owner or other Responsible Parties to contact in case of emergency:

1. **Contact Name:** _____

Phone Number: _____

Home Address: _____

2. **Contact Name:** _____

Phone Number: _____

Home Address: _____

3. **Contact Name:** _____

Phone Number: _____

Home Address: _____

4. **Contact Name:** _____

Phone Number: _____

Home Address: _____

Owner's Signature: _____

Owner's Signature: _____

Date Completed: _____

CITY OF CLE ELUM BUSINESS LICENSE APPLICATION CONTINUED

**Supplemental Questionnaire
For New Business License Application**

Will You:

- 1.) Operate the business from a residentially zoned property? Yes_____ No_____
- 2.) Remodel any portion of your business locations? Yes_____ No_____
- 3.) Alter your business location in any way (interior or exterior)? Yes_____ No_____
- 4.) Erect or place any signs? Yes_____ No_____
- 5.) Sublease space in your business to another business? Yes_____ No_____
- 6.) Have any outdoor storage? Yes_____ No_____
- 7.) Create any parking spaces for your business? Yes_____ No_____
- 8.) Have a propane tank installed? Yes_____ No_____
- 9.) Have a public event or events involving food of any kind? Yes_____ No_____
 If yes, a Kittitas County Health Permit is required.

Signature of Applicant

Date

Signature of Applicant

Date

CITY OF CLE ELUM BUSINESS LICENSE APPLICATION CONTINUED

BUSINESS LICENSE FEES

Prices are per annum or any part thereof. No prorates

Basic License Fees:

1.	Contractors	\$ 60.00
2.	For every business employing 1 to 2 persons:	\$ 30.00
3.	For every business employing 3 through 5 persons:	\$ 60.00
4.	For every business employing 6 through 12 persons:	\$ 90.00
5.	For every business employing 13 through 25 persons:	\$ 145.00
6.	For every business employing 26 through 50 persons:	\$ 260.00
7.	For every business employing over 51 persons:	\$ 375.00
8.	Relocation or change fee:	\$ 25.00
9.	Mall/Market license – Primary Manager / Owner:	\$ 60.00
	Each Booth or Participant:	\$ 35.00

Specialty License Fees:

1.	Solicitor's one-day license, First Day:	\$ 15.00
	Each Day Thereafter:	\$ 10.00
2.	Annual solicitor's license:	\$ 35.00
3.	Week-end (booth fee) (Per 3-day weekend)	\$ 25.00

Amusement Device Fees:

Per device, per year

1.	Pool tables	\$ 20.00
2.	Electronic games and coin-activated movies	\$ 20.00
3.	Vending machines (food, merchandise)	\$ 20.00
4.	Jukeboxes	\$ 20.00
5.	Crane type machines	\$ 20.00
6.	Cabaret License	\$ 30.00

Late Fees and Penalties:

*After 90 Days	\$ 25.00
----------------	----------