



FILL OUT THIS FORM COMPLETELY
 (INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED)

TEMPORARY BUSINESS LICENSE APPLICATION

(A TEMPORARY LICENSE IS ONLY FOR WORK TO BE PERFORMED IN RENTON FOR 90 DAYS OR 480 HOURS)

GENERAL BUSINESS LICENSE Required: Every business enterprise, including those with a temporary or portable sales location, shall obtain, from the Fiscal Services Division, a general business license for the current calendar year. The license shall be nontransferable. A business enterprise with a permanent location outside the City, but conducting work in the city of Renton is required to obtain a City of Renton license. *Reference Renton Municipal Code Title 5 Chapter 5.*

Business Name & Physical Location:

Business Phone #: _____

Mailing Address (Please check if same as above)

Have you previously had a Renton Business License? _____

Is your business door-to-door solicitation/peddler? _____
 (if so, please stop and complete a Peddler Permit Form)

Are you a non-profit entity? _____ If so, please provide Form 501(c)(3)

Date Business is Expected to operate in Renton: _____

Emergency Name & Telephone Number (**other than owner**)

WA State UBI#: _____

Legal Business Owner(s) Name and Address:

Owner's Cell #: _____

Email address: _____

DESCRIBE TYPE OF BUSINESS IN DETAIL:

Contractors, plumbers, electricians, etc. please complete

State Contractor's Lic. No. _____

Address where work to be performed _____

Temporary Business License Fee: \$50.00

A temporary license will expire after 90 days or 480 hours worked (whichever comes first). A temporary license will **NOT** be sent a renewal and you will need to reapply if you should conduct work in Renton at a later date.

I hereby swear or affirm that the statements and information furnished by me on this application are, to my knowledge, accurate, true and complete. I acknowledge that these statements and information are public records that may be available for public inspection pursuant to RCW 42-56, the Public records act, and that any inaccurate, false, or incomplete statement may be a crime under the RCW and/or RMC, punishable under RCW 9.92 and/or RMC 1-3-1.

SIGNATURE: _____

Print Name: _____ Date: _____

Title: _____ Phone: _____

Return Completed Application with payment to: City of Renton License Division Phone: 425-430-6851
 1055 South Grady Way Email: licensing@rentonwa.gov
 Renton, WA 98057

FOR OFFICE USE ONLY	AMOUNT PAID	HOW PAID	DATE	NAICS #	APPLICATION #