

CITY OF BONNERS FERRY, IDAHO

APPLICATION FOR CITY BUSINESS LICENSE
(REQUIRED UNDER ORDINANCE NO. 299)

Date of Application:	
-----------------------------	--

License Issued to:	Address:
Business Name:	Location:
Mailing Address:	Business Phone No.:

Kind of Business:	(Give Details)
--------------------------	----------------

Check One (1) of the following:	<input type="checkbox"/> Retail	<input type="checkbox"/> Wholesale	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Contractor	<input type="checkbox"/> Service
	<input type="checkbox"/> Other: (Specify):				

Ownership Status:	<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation
--------------------------	-------------------------------------	--------------------------------------	--------------------------------------

List Partner or Corporate Officers	Title	Residence Address

This Business Formerly Operated By:	<input type="checkbox"/> Entire Business Taken Over	<input type="checkbox"/> Portion Thereof
Have you ever had a business license before?	<input type="checkbox"/> YES <input type="checkbox"/> NO	

If Yes, State Prior Company Name:	Date prior business started:
--	-------------------------------------

Describe any physical building changes and/or building use changes that will be made as a result of this business:	
---	--

A \$10.00 FEE MUST ACCOMPANY THIS APPLICATION:	Applicant Signature:	Office / Title:
---	----------------------	-----------------

OFFICE USE			
FEEL PAID:		RECEIPT NO.:	
APPROVED (S):		DATE:	
LICENSE NO. ASSIGNED:		DATE ISSUED:	

CONDITION:	
-------------------	--

A new business license must be obtained if ownership in the business changes or if the physical location of the business changes.