GENERAL BUSINESS LICENSE APPLICATION

1. Entity Information: Lookup your Business / Location ID at *Secure.DOR.WA.gov/gteunauth/_/#1*

Washington Unified Business Identifier: ___ ___ ___ – ___ ___ ___ – ___ ___ ___ – ___ ___ ___ ___ (UBI 9 digits – Business ID 3 digits – Location ID 4 digits)	**Legal Entity Type:** ☐Corporation ☐Partnership ☐LLC ☐PLLC ☐Sole Proprietor ☐Other_____		
Legal Entity Name:	**Business Name** (DBA / Trade Name)**:**		
Start Date in Bellevue:	**Business Phone:**		**NAICS:**
Attention: **Mailing Address:**	**City:**	**State:**	**Zip Code:**
Physical Address:	**City:**	**State:**	**Zip Code:**

2. Business Activities:

Type of Business: ☐Wholesaling ☐Retailing ☐Service ☐Manufacturing ☐Printing/Publishing ☐Extracting

Estimated Bellevue ANNUAL taxable gross receipts: ☐$0–$170,000 ☐$170,001 or above

Is the entity located in Bellevue? ☐No ☐Yes: If yes, please provide the office/facility square footage:_____

Describe your business activity:

Does your business provide: ☐Utilities Services ☐Ambulance Operator ☐Cabaret ☐For Hire / Taxi ☐Charge Admissions ☐Marijuana / Cannabis ☐Adult Cabaret ☐Scrap Metal Business ☐Dance Hall Operator & Premise ☐Pawn / Dealer Activities

Are you operating your business from a residence? ☐No ☐Yes: If yes, will you have employees, clients, deliveries or other visual forms of a business presence: ☐No ☐Yes

Has this legal entity previously been registered with the City of Bellevue?
☐No ☐Yes: If yes, please provide your previous Bellevue registration number:_____

3. Business Contact Information:

First Name:	**Last Name:**	**Title:**
Phone:	**Email:**	

4. Registration Fee:

Is this Legal Entity currently registered with the City of Bellevue?
☐No: Please remit a $93 payment for the year 2020 and attach to this application. Make payment out to the "City of Bellevue".

Mail to: City of Bellevue
PO Box 90012
Bellevue, WA 98009

☐Yes, my current Bellevue registation number is _____.

Is this application to register an additional business location of above referenced legal entity? ☐No ☐Yes: If yes, no fee due.

I hereby certify that the statements and information provided on this appliation are true and complete to the best of my knowledge.

Print Name: _____ Position: _____ Phone: _____

Signature: _____ Date: _____ Email: _____

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