



City of Mukilteo Finance Department
 Attn: Business Licenses
 11930 Cyrus Way
 Mukilteo, WA 98275
 (425) 263-8035
croberts@ci.mukilteo.wa.us
www.ci.mukilteo.wa.us

NON-RESIDENT BUSINESS LICENSE APPLICATION

Definition: A business which does not occupy a fixed place of operation within the City.

BUSINESS NAME: _____
 OWNER/REP NAME: _____
 PHYSICAL LOCATION: _____
 MAILING ADDRESS: _____
 CITY/STATE/ZIP: _____
 PHONE: _____
 EMAIL ADDRESS: _____
 UBI #: _____
 CONTRACTOR #: _____

TYPE OF OWNERSHIP (Check all that apply): Sole Proprietor Partnership Corporation LLC

TYPE OF BUSINESS: _____ Construction _____ Retail _____ Wholesale _____ Services
 _____ Canvassing, Peddling or Soliciting (**Attach Form A: Canvasser, Peddler or Solicitor - REQUIRED**)
 _____ Other (*specify*): _____

SERVICES PROVIDED: _____

Will you have any sales offices, contractor shacks, warehouses, distributing plants or storage yards located on premises within the City:

NO YES If, YES, specify location(s): _____

Will you be installing any signage within the City: NO YES If YES, state size, number and location of sign(s): _____

CALCULATION OF FEES:

In addition to the first full year fee, the fee for an initial business license shall also include the prorated fee for the quarter, or portion thereof, during which the initial business license is issued.

IMPORTANT: Please use the Business License Fee Calculation Worksheet to determine the amount of business license fees due, worksheet can be found at www.ci.mukilteo.wa.us under Business Licenses. Include a printed copy of the worksheet with this application and remittance. For further information or assistance completing this application please contact Business Licensing at (425) 263-8035.

Under penalty of perjury, the undersigned hereby certifies that the information provided on this application is true and correct, to the best of her/her knowledge, and that the business for which this license is sought will be operated in a lawful manner and will not be in violation of any federal, state or local law, ordinance or regulation.

Signature: _____ Date: _____

Print Full Name: _____ Title (if applicable): _____

Please Note: Disclosure of information on this form does not eliminate the requirement to meet City regulations (**such as those for proper signage and adequate parking**) before business activity commences. Refer also to the separate Information Sheet for assistance with license requirements.

FOR OFFICE USE ONLY

Date _____ Fee Paid _____ BID # _____ LIC # _____