



# Business License Application

**\$50.00 Business License Fee**

**License # 2023 - \_\_\_\_\_**

*Business Licenses are active for a calendar year, expiring Dec 31<sup>st</sup>, and not transferable. Fees will not be prorated and are non-refundable.*

***Business Information (PLEASE PRINT)***

Name of Business: \_\_\_\_\_

DBA: \_\_\_\_\_

Owner's Name(s): \_\_\_\_\_ Business Phone: \_\_\_\_\_

Business Physical Location: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Email(s): \_\_\_\_\_

Preferred method of correspondence:  Email  Mail

Type of Business (5-word max): \_\_\_\_\_

***After Hours/Emergency Contact***

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

***Signature (Owner/Agent):*** \_\_\_\_\_ ***Date:*** \_\_\_\_\_

***Northside Fire District Information***

Building Stories: \_\_\_\_\_ Alarm System (yes or no): \_\_\_\_\_

Insurance Co.: \_\_\_\_\_ Policy No: \_\_\_\_\_

Any Chemicals or Flammable Materials in building (yes/no & location): \_\_\_\_\_

Building Owner/ICE Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Official Use Only**

**Land Use Compliance**

Planning Dept. Approval (Sign & Date) \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

Payment Method:  Cash  Credit Card  Check # \_\_\_\_\_

Date Processed/Sent: \_\_\_\_\_

**Send Completed Application & Payment to: City of Ponderay – PO Box 500 – Ponderay, ID 83852**