

Junk Dealer's Business License Application

License Number: JD _____ Date: _____ Annual Fee: \$25.00

Please Type or Print in Ink (All license fees must be submitted with the complete application)

Name of Applicant: _____

Home Address: _____

City, State, Zip: _____

Other Names Used: _____

Name of Establishment: _____

Address of Establishment: _____

City, State, Zip: _____

Name of Business: _____

City, State, Zip: _____

Business Phone: _____ Social Security Number: _____

Property Tax Number: _____

Other Business Premises location in County: _____

New License being requested: _____

Renewal of Current License: _____

Have you or any owners of this business ever been refused a bond? _____

If Yes, explain: _____

Do you own the business premises/real property involved? _____

Name of property owner: _____

Address of property owner: _____

City, State, Zip: _____ Phone: _____

All Applicants: Please attach a complete legal description for the business property.

INDICATE TYPE OF BUSINESS ORGANIZATION

Sole Proprietorship: Attach the names, addresses, and telephone numbers of all business owners

General Partnership: Attach the names, addresses, and telephone numbers of all general partners owning 20 percent or more of the business.

Limited Partnership: Attach the names, addresses, and telephone numbers of all general partners and each limited partner owning 20 percent or more of the business.

Corporation: Attach the names, addresses, and telephone numbers of each principal corporate office, corporate headquarters, and your Washington State resident agent.

Surety bond filed with Kitsap County: **YES:** _____ **NO:** _____

APPLICANT CERTIFICATION

As applicant, I certify and declare under penalty of perjury under the laws of the State of Washington and Kitsap County that the information submitted herewith is true and correct. I understand that no refunds will be made of the fees paid for processing this application. I also understand that any falsification or omission on this application form or any of its required attachments are grounds for a denial, suspension or revocation of the license, and may subject me to a civil and/or criminal penalty. I agree to comply with all laws, regulation, and requirements for the issuance and use of this business license as set forth in the Kitsap County Code.

Signature of Applicant

Date