



CITY OF WOOD VILLAGE

2055 NE 238th Drive
 Wood Village OR 97060
 Phone 503-667-6211
 Fax 503-669-8723

BUSINESS LICENSE APPLICATION

(A) GENERAL BUSINESS INFORMATION

Owner's Name & Title _____

Doing Business As (DBA, if applies) _____

Business Address _____, **Wood Village, Oregon 97060**

Mailing Address (if different) _____ City _____

Corporate Phone # _____ On Site Bus. Phone # _____ State, Zip _____

Fax # _____ E-mail _____ Web Page _____

Type of business (check one)

Sole Proprietor _____ Partnership _____ Corporation _____ Estate _____ Trust _____

Ltd. Liability Co. _____ Ltd. Partnership _____ S-Corporation _____ Home Occupancy _____ Other _____

F.I.E.N. _____ **DATE ESTABLISHED BUSINESS IN WOOD VILLAGE** _____

IF **RENEWING** YOUR BUSINESS LICENSE, PLEASE ENTER LICENSE NUMBER HERE _____ New Bus.

Business Activity or Description _____

(Businesses that serve food must list applicable Health Department Licenses)

(B) EMPLOYEES (TOTAL FOR EACH CATEGORY)

Full Time _____ Part Time _____ Seasonal _____

(C) BUSINESS OWNER INFORMATION REQUIRED

Owner's Name & Title _____

Address _____ City _____

Phone _____ Fax _____ State, Zip _____

E-mail _____ Web Page _____

CURRENT ON SITE MANAGER'S NAME AND PHONE NUMBER:

Manager's Name _____ **Phone Number** _____

(D) PROPERTY OWNER INFORMATION

Owner's Name _____

Address _____ City _____

Phone _____ Fax _____ State, Zip _____

Received Stamp		Paid Stamp		Copy to Fire Marshall Data <input checked="" type="checkbox"/>	
					BL YEAR 2009

(E) HAZARDOUS MATERIALS (if applicable)

Does your business involve the storage or use of any flammable materials or supplies?

Yes* _____ No _____

** (If your answer is YES, provide the name(s) of each material and the quantity kept at the business site. Attach additional sheets if necessary).*

MATERIAL NAME _____	AMOUNT ON PREMISES _____
MATERIAL NAME _____	AMOUNT ON PREMISES _____
MATERIAL NAME _____	AMOUNT ON PREMISES _____

Does your business use any products or materials that could be hazardous to humans or the environment if released, or involved in a fire? _____

Have you ever received a form from the State Fire Marshal's Office for reporting Hazardous Materials for the business?

_____ If so, please submit a copy of the report for Fire Department.

Including employees, patrons and the public, what is the maximum number of people you expect in your building(s) at any one time? _____

(F) THE FOLLOWING INFORMATION IS REQUIRED FOR BUILDING AND FIRE DEPARTMENT REVIEW

What is the building constructed of: wood _____ masonry _____ steel _____

What is the square footage of the building? _____

Does the building have a sprinkler system? _____

What was the previous use of this building? _____

Does the building meet the American with Disabilities Act (ADA) requirements and Chapter 11 of the Oregon Structural Specialty Code? _____

New Certificate of Occupancy issued? _____

What changes/additions/removals will be performed for this business site? List all structural, electrical, plumbing and mechanical work to be performed. Permits may be required - contact City Hall at 503-667-6211 for more information regarding permits. _____

(G) CONTRACTOR'S INFORMATION (if applicable)

Construction Contractor's Board # _____	Expires _____
Metro Contractor # _____	Expires _____
Other Licenses (number and description) _____	Expires _____

(H) BUSINESS LICENSE FEES			
Business License Fees <i>(with gross annual earnings exceeding \$25,000.)</i>	\$50.00	Annually	Subtotal Page 3 \$50.00
Temporary Use Permit <i>(with gross annual earnings exceeding \$25,000.)</i>	\$25.00	Annually	Subtotal
		Annually	
Pinball machine (electronic or mechanical), each	\$200.00	Number _____	Subtotal _____
Shuffle, miniature pool, baseball or like device, each	\$25.00	Number _____	Subtotal _____
Digger or crane machine, each	\$75.00	Number _____	Subtotal _____
Video, electronic amusement devices or games, each	\$75.00	Number _____	Subtotal _____
Hobby horse or similar machine, each	\$20.00	Number _____	Subtotal _____
All other amusement devices and machines, each	\$20.00	Number _____	Subtotal _____
TOTAL FEES			\$50.00

IMPORTANT: SIGNATURE REQUIRED!

OWNER/PRINCIPLE OFFICER SIGNATURE STATEMENT

I hereby certify that the information contained herein is true to the best of my knowledge. I agree to abide by all laws and regulations and to correct any hazards or violations as they may pertain to the above business and future business activities.

I acknowledge that issuance of this license does not constitute compliance with local and state laws and regulations including but not limited to the City of Wood Village Municipal Code, the Zoning and Development Code, and the Oregon Building Code. Failure by the Manager or Owner of this business to achieve or maintain compliance with all laws and regulations may result in a revocation of this Business License by the City.

Print Applicant Name _____ **Title: (circle one): **Manager or Owner (ONLY)****

Signature _____ Date _____

~ ~ ~ CITY USE ONLY ~ ~ ~

Business License # _____ Date Issued _____ Zoning _____

NAICS Code _____ Amount Paid _____ Receipt # _____

Fire Department Approval: _____ Date _____

Comments: _____

Public Works Department Approval: _____ Date _____

Comments: _____

Planning Department Approval: _____ Date: _____

Comments: _____

Multnomah County Sheriff's Office: _____ Date: _____

Comments: _____