

SECONDHAND DEALER'S BUSINESS LICENSE APPLICATION

LICENSE NUMBER SD _____ DATE _____ ANNUAL FEE \$10.00

PLEASE TYPE OR PRINT IN INK - (ALL LICENSE FEES MUST BE SUBMITTED WITH THE COMPLETE APPLICATION)

Name of Applicant (First/Middle/Last)

Home Address

City/State/Zip Code

Other Names Used (Maiden Name, Etc.)

Name of Establishment

Address of Establishment

City/State/Zip Code

Name of Business

City/State/Zip Code

Business Phone

Other Business Premises location in County

Social Security Number

Tax Identification Number

New License being Requested: _____

Renewal of Current License: _____

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

(If yes, explain the circumstances) _____

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

Name/Address/Telephone of business premises/real property owner.

ALL APPLICATIONS: ATTACH A COMPLETE LEGAL DESCRIPTION FOR THE BUSINESS PROPERTY.

INDICATE TYPE OF BUSINESS ORGANIZATION

SOLE PROPRIETORSHIP: Attach the names, addresses, telephone numbers of all business owners.

GENERAL PARTNERSHIP: Attach the names, addresses, telephone numbers of all general partners owning 20 percent or more of the business.

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

CORPORATION: Attach the names, addresses, telephone numbers of each principal corporate offices, 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; 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