

BUSINESS LICENSE FOR RENTAL HOUSING FEES

Fees are based upon cumulative number of units at all locations.

1–4 units:\$53.00 5–24 units:\$106.00 25+units:\$212.00 All licenses expire June 30. Renewal notices are mailed in May. Business licenses are not pro-rated and are nontransferable. If you discontinue your rental activity in Auburn, please notify the Permit Center at (253) 931-3020. Business License #

PLEASE RETURN TO:

Permit Center 25 West Main Street Auburn, WA 98001 Phone: (253) 931-3020 Fax: (253) 804-3114

APPLICATION FOR BUSINESS LICENSE FOR RENTAL HOUSING (ORDINANCE NO. 5882)

LICENSEE MAILING AD	DRESS		Phone:			
(All information related to	Fax:					
Name:			e-mail:			
Title:						
Address:		Suite:				
City, State:		Zip:				
WEB SITE (if applicable)						
LEGAL STATUS: D S	ole Proprietor 🛛 Indiv	idual Corporation		□ Partnership		
	ION FOR ALL OWNERS, A separate page if necessar	GENTS, PARTNERS OR CO	RPORATE OFF	ICERS, EVEN IF		
1) Name:			Title:			
Home Address:		City/State/Zip:		Home Phone:		
Date of Birth:	Place of Birth:	Driver's License #:				
2) Name:		Title:		% Owned		
Home Address:		City/State/Zip:		Home Phone:		
Date of Birth:	Place of Birth:	Driver's License #:		L		
MANAGER/AGENT/EMERGENCY CONTACT:		Title:		Business Phone:		
Home Address:		City/State/Zip:		Home Phone:		
Date of Birth:	Place of Birth:	Drivers License #:		<u> </u>		
FOR OFFICE USE ONLY:						
Prior License #Date Received: TR #\$ Issue Date: SIC Code						

AUBURN * MORE THAN YOU IMAGINED

WA STATE UBI/TAX #: If applicable	BUSINESS INFORMATION FOR CORPORATIONS, LLCs, PARTNERSHIPS FEDERAL TAX ID #: CONT If applicable		RACTOR ID #: applicable				
RENTAL HOUSING UNITS (list all properties you own)							
Property Name/Address		# of Units	Parcel Number				

Have you ever had a rental housing business license with the City of Auburn denied, revoked or suspended? □ Yes □ No

If yes, when and for what property: _____

APPLICANT'S SIGNATURE

I hereby certify and declare under penalty of perjury under Washington law that the statements furnished by me on this application are true and complete to the best of my knowledge. I understand that the issuance of this license is conditioned upon compliance at all times with all applicable ordinances, regulations and statutes of the City of Auburn and the State of Washington. The issuance of this business license does not imply compliance with the Zoning Code and International Fire and Building Codes.

Date_____ Signature_____

Title

THIS APPLICATION ALSO SERVES AS YOUR APPLICATION FOR A CITY OF AUBURN BUSINESS LICENSE. IF APPROVED, ONLY A SINGLE LICENSE WILL BE ISSUED.