



CITY OF ROY

APPLICATION FOR BUSINESS LICENSE

APPLICATION IS HEREBY MADE FOR A BUSINESS LICENSE FOR THE CITY OF ROY, WASHINGTON.

DATE _____

BUSINESS NAME _____

OWNER _____

MAILING ADDRESS _____

TYPE OF BUSINESS _____

TELEPHONE NUMBER _____

STATE DEPT. OF REVENUE TAX NUMBER _____

CONTRACTOR'S REGISTRATION # _____
(IF APPLICABLE)

PIERCE COUNTY HEALTH APPROVAL # _____
(IF APPLICABLE)

Under penalties of perjury, I declare that I have examined the foregoing and to the best of my knowledge and belief, declare it to be true, complete and correct.

SIGNATURE OF APPLICANT

Business licenses are issued for a one-year period beginning on February 1 of each year and ending on January 31 of the following year.

Please submit your check for \$45.00.
PO Box 700 Roy, WA 98580