

BUSINESS LICENSE APPLICATION ✧ CITY OF SANDPOINT, IDAHO

New License / Currently No License **OR** Currently Licensed Business changing: location ownership nature of business

PLEASE SUBMIT AT LEAST TEN BUSINESS DAYS PRIOR TO STARTING BUSINESS.

Date business will begin operating in Sandpoint or date change will take effect: _____

Name of Business: _____
(the business name that is displayed on signs and advertising / what the business is commonly known as)

Other name(s) under which business might be conducted: _____

Is this business operated from a storefront, office, home, or other building within Sandpoint **city limits**? Yes No

If "Yes", what is the physical street address: _____ *

If "No", providing the business street address is optional, but the business mailing address is required (see below).

Business mailing address: _____ *
A business license cannot be issued without a valid mailing address for your business.

Business phone number: _____ * Business fax number: _____

Business email address (optional): _____

Business website address (optional): _____

Business Entity Classification -- *How is this business filed with the Idaho Secretary of State's Office?*

Assumed Business Name (ABN) Limited Liability Company (LLC) Partnership Corporation filing not required
Pursuant to Idaho Code § 30-21-805, you must register your business name with the Idaho Secretary of State, unless your business name is the same as your own personal name (must include both your first and last name). Visit: www.sos.idaho.gov

Business Type: Retail Service Professional Manufacturing Wholesale Home Occupation Other

Name(s) of Owner(s): _____
Attach separate sheet, if necessary. If owner is a corporation, please attach separate sheet listing officer names & titles.

Owner's/Corporate mailing address: _____ *
if different from business mailing address provided above

LOCAL After-Hours Emergency Contact and Phone Number: _____ *
Do not enter the regular business phone here. This needs to be a separate emergency name and phone number.

What is the nature of the business that will be conducted? *(What will be sold or what services will be performed?)*

I acknowledge that I have reviewed and agree to abide by Sandpoint Business and License Regulations, City Code Title 3, Chapter 11, and, if applicable, Sandpoint Home Occupation Regulations, City Code Title 9, Chapter 11.

*I understand that the information I have provided on this application is public record and that a home address or home/mobile phone number used in conjunction with my business can be disclosed under the Public Records Law.

Signature of Owner or Owner's Agent

Date of Signature

name of person who signed the application

name of person who completed the application (if different)

License Fee: \$50 if new or \$25 for changes (Check? payable to: City of Sandpoint) *Proof of 501(c)(3) status required for fee waiver.*

If business physical address is within Sandpoint city limits, commercial or residential, please complete page 2.

City of Sandpoint Office Use Only

check # (or "cash")

receipt #

License #



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This page only pertains to and should only be completed by businesses with a physical street address (residential or commercial) within Sandpoint City limits. Please note that some properties in certain areas of unincorporated Bonner County have been assigned a Sandpoint address but are not located within city limits.

1. BUSINESS HOURS: Is the business open all year? Yes No Comments: _____

If not, indicate months open: Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec

What are your hours of operation? Saturday: _____ Sunday: _____

Mon: _____ Tue: _____ Wed: _____ Thu: _____ Fri: _____

2. BUSINESS SPACE: Square Footage _____ Occupancy Load _____ (estimate if unknown)

How many people does this business employ in Sandpoint? _____ or Owner Only? Yes

What is the maximum number of people who will work at the business location at one time (per shift)? _____

Will you discharge fats, oils, grease or anything other than domestic sewage into the sewer system? Yes No

Will you sell, use, or store flammable materials or liquids at the business location? Yes No

Does this business own or does it rent its business space? Own Rent/Lease

If renting, please provide contact information for the owner/property manager of the building or business space:

Bldg Owner/Mgr Name: _____ Phone Number: _____

3. ZONE WHERE BUSINESS IS LOCATED: Commercial A Commercial B Commercial C

Industrial General Industrial Business Park Industrial Technology Park

Mixed Use Residential Residential Multi-Family Residential Single-Family Rural Residential

To determine your zone, visit the Planning Department section of the City's website, www.sandpointidaho.gov, or call the Planning Department at 263-3370 or consult Planning Department staff at City Hall, 1123 Lake Street.

4. BUSINESS IMPROVEMENT DISTRICT ("BID"): To determine whether your business is located within the BID (generally in the downtown area), please review this description of the BID boundaries, per City Code 7-14-10:

Starting at Superior Street and First Avenue, then west to Third Avenue, north to Lake Street, west to Boyer Avenue, north to Highway 2, east to Sixth Avenue, north to Alder Street, east to Short Avenue, north to Larch Street, east to Fifth Avenue, north to, but not including, 900 Fifth Avenue, returning south to Larch Street, then east to Fourth Avenue, south to Poplar Street, east across Sand Creek, south along Lake Pend Oreille around City Beach to Highway 95 as it enters Sandpoint, then west to the point of beginning. All businesses located within the area encompassed by the BID boundary and all businesses that front upon any street that is part of the BID boundary are included in the BID.

Is business located within the BID? Yes No Unsure? Call 255-2828 for assistance. If "Yes", please provide your Employer Identification Number/EIN (issued by the IRS): _____

5. REMODELING: Will you be remodeling any portion of the building where the business is located? Yes No
If so, please ensure you have obtained any permits you will need and that you are in compliance with Sandpoint's building regulations, City Code Title 8. Call the Public Works Department at 263-3407 if you have any questions.

6. SIGNS: Do you intend to install, rework, or hang a sign? Yes No If "Yes", **a sign permit is required.**
All signs/banners within Sandpoint city limits must be in compliance with the Sign Code, Chapter 6 of Title 9, Sandpoint City Code. You can find the permit application on the City website or in the Planning Dept at City Hall.

7. HOME BUSINESSES: If this business is a home occupation, please ensure that it is in compliance with Sandpoint's Home Occupation Regulations, City Code Title 9, Chapter 11. With very limited exceptions, signs are not allowed in residential zones, and there should be no customer traffic. Call the Planning Dept at 263-3370 with any questions.

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Department	Initial Approval	Approved By (please print name)	Date Approved	Department	Initial Approval	Approved By (please print name)	Date Approved
1. Planning				4. Police			
2. Pub Works				5. Finance			
3. Fire				6. City Clerk			

Sandpoint City Hall
1123 Lake St., Sandpoint, ID 83864

(208) 255-2828 ✧ www.sandpointidaho.gov

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Name of Business _____

License Number _____

License Issue Date _____

The USDA and the City of Sandpoint are equal opportunity providers and employers.