

BUSINESS LICENSE APPLICATION

225 FIFTH STREET • SPRINGFIELD, OR 97477 • PH: 541-726-3753 • FAX: 541-726-3689



All fees are non-refundable and includes a 7.5% administrative fee

LICENSE TYPE

<input type="checkbox"/> Auctioneer <input type="checkbox"/> \$254.78 per Fiscal Year <u>or</u> <input type="checkbox"/> \$99.98 per day	<input type="checkbox"/> Auto Wrecker \$99.98 per Fiscal Year
<input type="checkbox"/> Dance Hall <input type="checkbox"/> \$254.78 Initial <u>or</u> <input type="checkbox"/> \$130.08 Renewal	<input type="checkbox"/> Electrical Products \$53.75 per Fiscal Year
<input type="checkbox"/> Pool Billiard Room \$84.93 Base Fee + Number of Tables _____	<input type="checkbox"/> Sound Truck <input type="checkbox"/> \$84.93 per Fiscal Year <u>or</u> <input type="checkbox"/> \$8.60 per day
<input type="checkbox"/> Manufactured Dwelling Park Number of Spaces _____ 1-25 spaces \$45.15 / 26-50 spaces \$84.93 / 51-75 spaces \$122.55 / 76-100 spaces \$158.03 / Over 100 \$158.03 + 3.23 per space over 100	
<input type="checkbox"/> Vending on City Streets – No Charge	

BUSINESS INFORMATION

Business Name:	DBA:		
Physical Address:			
City:	State	Zip Code	
Business Phone Number:	Days and Hours of Operation:		
Mailing Address: <input type="checkbox"/> Same as above			
City:	State:	Zip Code:	
Contact Name at Business Location:	Phone Number:		

BUSINESS OWNER AND CONTACT INFORMATION

Business Owner's Full Name:		
Phone Number:	Email Address:	
Business Owner's Mailing Address: <input type="checkbox"/> Same as above		
City:	State:	Zip Code:

PROPERTY OWNER AND CONTACT INFORMATION

Do you own or lease the property? <input type="checkbox"/> Own <input type="checkbox"/> Lease		
Property Owner's Full Name:		
Mailing Address:		
City:	State:	Zip Code:
Email Address:	Phone Number:	

SIGNATURE AND HOLD HARMLESS

Please note that we require a minimum of two (2) weeks to process the application. Incomplete or missing information will delay the review process.

Applicant shall defend, indemnify and hold harmless, the City of Springfield, its officials, employees and volunteers from and against any and all claims, suits, actions or liabilities for injury or death of any person, or for loss or damage to property, which arises out of or in connection with the Applicant's activity or event, including use of any premises, or from any activity, work or things done, permitted, or suffered by Applicant in connection with the Applicant's activity or event, including use of any premises, except only such injury or damage as shall have been occasioned by the sole negligence of the City of Springfield.

The information provided on this form is true and complete to the best of my knowledge

Applicant's Name: (Please Print)	Date:
Applicant's Signature:	Phone Number:

Expedited Fee – Additional 50% of Application Fee Yes Applicant's Initials _____

Expedited Fee is not a guarantee of approval; specific conditions may apply.

Payment must be submitted with application. Make checks payable to: City of Springfield

The Business License year is July 1st through June 30th of each year (Fiscal Year). Applications made during the business year are not pro-rated and are subject to the entire fee. All Business Licenses are subject to a 7.5% administration fee. All fees are non-refundable and no license is transferable.