



CITY OF UTQIAGVIK

"Farthest North Incorporated City"

Name of Firm: _____

Owner (Please print) _____
Last name First name Middle

Other Owner if applicable) _____

Physical Address _____

P.O. Box: _____

City, State, Zip Code _____

Business Phone: _____

Home Phone: _____

Type of Business: _____

Please mark the one that applies to your business:

- Individual
 Partnership
 Corporation
 Incorporated
 LLC

Social Security Number: _____
NSB Zoning Permit _____
State of Alaska or Temporary Business License No: _____
Expiration Date: _____

An individual, partnership, or corporation, which engages in business activity in the City of Utqiagvik, must have a business license. The City of Utqiagvik business license cannot be issued without a valid copy of your State business license. Listed below are the fees:

| | | |
|------------------------|----------|---|
| Biennial fee | \$200.00 | Good for 2 years. (Example: If license was issued on 4/28/17, license expires in 12/31/18), |
| Regular renewal | \$200.00 | If paid before December 31 st of the expiring year. |
| Late Renewal | \$100.00 | If renewal fee is paid after December 31 st of the expiration date/year, a late fee charge of an additional \$100 shall be included with the renewal fee(s). |

The applicant certifies that by the above act of making an application for City of Utqiagvik Business License, that the applicant agrees to be bound by all terms, rules, laws, statutes and/or ordinances of the Federal, State, Borough and City Governments, that relate to retail sales. License(s) must be posted in a conspicuous place, at the business location noted above.

I, signify that the above information is true and correct to the best of my knowledge.

Applicant Signature _____ EMAIL: _____

DATE: _____

FOR OFFICE USE ONLY:

Receipt Number: _____ Initials & Date: _____ City of Utqiagvik Temp License# _____
_____ _____ City of Utqiagvik Regular License # _____