



CITY OF VALDEZ
BUSINESS REGISTRATION APPLICATION

NAME OF FIRM _____
DESCRIPTION OF BUSINESS _____
OWNER OR AGENT _____
PHYSICAL ADDRESS OF BUSINESS _____
LOCATION IN VALDEZ? YES NO
If YES please fill out the line below if NO please write No location _____
LEGAL DESC: LOT _____ BK _____ SUBD _____ ZONING _____
OWN HOME OFFICE
RENT AFFIDAVIT FROM OWNER
MAILING ADDRESS _____
BUSINESS PHONE _____ HOME PHONE _____
E-MAIL ADDRESS _____

ARE THERE ANY HAZARDOUS MATERIALS STORED IN THE BUILDING (i.e., FLAMMABLE, ACID, ETC)?
_____ IF SO, LOCATION & TYPE _____

PLEASE ATTACH A COPY OF YOUR STATE OF ALASKA BUSINESS LICENSE & OTHER PERTINENT LICENSES OR CERTIFICATES.

SIGNATURE OF APPLICANT _____ **DATE** _____

OFFICE USE ONLY

HOME OCCUPATION YES NO H.O. PERMIT APPLICATION ATTACHED YES NO

B&B HOME OCCUAPTION PERMIT APPLICATION ATTACHED YES NO

FEE WAIVED PER RESOLUTION # 12-72

APPLICATIONS ARE REQUIRED TO BE RENEWED YEARLY. ANY CHANGES REQUIRE ANOTHER \$5.00 FEE.

APPROVAL: BLDG. DEPT: _____

FIRE DEPT: _____

PLANNING DEPARTMENT: _____ (ZONING)

PLANNING DEPARTMENT DIRECTOR _____ DATE _____