



City Of Mabton 305 Main Street Po Box 655 Mabton, WA. 98935
Office: 509-894-4096 Fax: 509-894-4813

Business License Application

\$60.00 fee Please make your check made payable to: City of Mabton
Please complete the following form and return to city staff for processing; incomplete forms will not be processed. Please attach and return with your completed application. Also provide date(s) of service.

Business License: _____

Business Location: _____

Mailing Address: _____ City: _____ Zip Code: _____

Business Phone: _____ E-Mail Address: _____

Please provide a description of business (Type of service): _____

Federal I.D. Number: _____ Health Dept. Number: _____

Labor & Industries Number: _____ Contractor License: _____

Washington State Department of Revenue Tax Number: _____
(Please use the proper City of Mabton Sales Tax number when reporting to the Dept. of Revenue, that number is 3904)

Business Owner(s): _____

Home Address: _____ City: _____ Zip Code: _____

Contact Phone: _____ Are all Businesses Taxes Current? ___ Yes ___ No

I certify under penalty of perjury that the information above is correct and complete to the best of my knowledge and belief.

Date: _____ Signature: _____ Title: _____

DO NOT WRITE BELOW THIS LINE.....

Business License: Approved ___ Denied ___

Does the business meet all zoning requirements? YES ___ NO ___ N/A ___

Receipt Number: _____ Denial Reason: _____

Approved/Denied by: _____ Title: _____

**License Number: _____ Small Works Roster/Vendor? ___ YES ___ NO
Number: _____**