



CITY BUSINESS LICENSE APPLICATION

City of Seward
City Clerk
P.O. Box 167
410 Adams Street
Seward, AK 99664
Telephone: 907-224-4046
Fax: 907-224-4038
Email: clerk@cityofseward.net

- Payment in the amount of \$30 (Non-refundable annual fee)
- Copy of State Business License or No. _____
- Copy of Borough Sales Tax Registration Card or Registration No. _____
- Copy of any required Occupational Licenses or No. _____

Your city business license will be issued once the City Clerk has verified the above and has received proof that all of your tax and other accounts with the City and the Kenai Peninsula Borough are current.

Annual renewals are due January 31 & Seasonal (May 1-Sept. 30) are due May 1st

If your business license application is submitted between January 1 and September 30, your license will be issued for the remainder of that calendar year. If your application is submitted between October 1 and December 31, the license will be issued for the remaining period of the year in which you applied and for all of the following calendar year. This does not apply to renewals.

Annual (operate year round)

Seasonal (operate only from May 1 – Sept 30)

Legal Name of Business Entity: _____

(needs to match the name of the business on your State of Alaska Business License)

Mailing Address for LICENSE & RENEWAL: _____

City: _____ State: _____ Zip: _____ Telephone: _____ Cell: _____

Email Address: _____

Please Describe Your Business Activity and how it will be conducted: _____

Physical Business Location in Seward: _____

(inside City Limits)

- Category:** Retail/Trade Charter Construction Childcare Vehicle for Hire Tour Operator
- Lodging/Nightly – Short Term Rental Communication Services Professional Services
- Monthly Rental Educational Fourth of July Vendor Craft Shows/Special Events
- Other _____

Owner Name(s): _____

Contact Name(s): _____

Please note Zoning Limitations: A business license does not authorize the holder to conduct business in violation of any zoning ordinance. If the applicant ceases to engage in business or change its name, nature or business location, the business license expires. **You must provide a physical business location.** (A post office box or mail drop is not a physical business location.)

CORPORATE OFFICERS

President _____

Vice President _____

Secretary: _____

FOR OFFICE USE ONLY	
Notice Sent: _____	Accts. Verified: _____
Zoning District: _____	Use Allowed? _____
Note: _____	
Received (date & initials): _____	

As Applicant, I _____, certify or declare under penalty of perjury under the laws of the State of Alaska that the foregoing is true and correct.

X _____
Signature Printed Name Title Date