



# City of Manzanita, Oregon

543 Laneda Avenue • P.O. Box 129, Manzanita, OR 97130-0129

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[cityhall@ci.manzanita.or.us](mailto:cityhall@ci.manzanita.or.us)

## APPLICATION FOR BUSINESS LICENSE

Business Name: \_\_\_\_\_

Description of business activity: \_\_\_\_\_

CCB#: \_\_\_\_\_ PB#: \_\_\_\_\_ LCB#: \_\_\_\_\_

Include copy of CCB registration certificate with application

Business Street Address: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Owners: \_\_\_\_\_ Phone: \_\_\_\_\_

(Include partners): \_\_\_\_\_ Phone: \_\_\_\_\_

*If a corporation*

President: \_\_\_\_\_ Phone: \_\_\_\_\_

Secretary: \_\_\_\_\_ Phone: \_\_\_\_\_

Address – Home Office: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

### License Fee

New and Renewals  
issued 1/1 to 6/30  
for the calendar year

New Licenses only  
issued 7/1 or after  
for the calendar year

\_\_\_\_\_ One or two employees\*

\$75.00

\$37.50

\_\_\_\_\_ Three to five employees\*

\$100.00

\$50.00

\_\_\_\_\_ Six or more employees\*

\$125.00

\$62.50

\*For the purposes of computing the number of employees, "employees" include owners/managers plus other workers, whether compensated or not, present at one time during peak season. Ord. 94-8

Signature of Person Making Application: \_\_\_\_\_

Official Use Only-Do not write below this line.

Fee paid: \_\_\_\_\_

Date: \_\_\_\_\_

Check #: \_\_\_\_\_

Receipt #: \_\_\_\_\_