



City of Ketchum

Business License Application

Submit completed application and \$50 fee to the City Clerk Office, PO Box 2315, 480 East Ave., N., Ketchum, ID 83340. If you have questions, please contact Business License & Tax Specialist, Kathleen Schwartzenberger at taxes@ketchumidaho.org or (208) 726-3841.

BUSINESS CONTACT INFORMATION	
Name of Business:	
Doing Business As:	
Business Physical Address:	
Business Mailing Address:	
Business Phone:	Business Fax:
Business Email:	Business Website:
PROPERTY OWNER INFORMATION	
Name:	
Mailing Address:	
Phone:	Emergency Number:
Zone: <small>*LI District provide copy of a valid Certificate of Occupancy</small>	Business operated from your residence: Yes <input type="checkbox"/> No <input type="checkbox"/>
BUSINESS OWNER INFORMATION	
Name:	
Street Address:	
Mailing Address:	
Phone:	Emergency Number:
State ID:	Federal ID:
BUSINESS MANAGER INFORMATION	
Name:	
Mailing Address:	
Phone:	Emergency Number:
BUSINESS INFORMATION	
Previous business name and type of use at this location:	
Describe current business operation and type of use:	
Date business established:	
Proposed opening date:	
Hours of operation:	
Is this Business a: Daycare <input type="checkbox"/> Non-Profit <input type="checkbox"/>	
If this Business is a daycare, <i>attach copy of daycare license.</i>	

Number of employees: Full Time _____ Part Time _____	
Number of square feet: Retail _____ Wholesale _____ Office _____ Warehouse _____ Research & Development _____ Manufacturer _____ Other _____	
Number of on-site parking spaces: Required _____ Provided _____ <i>submit site plan showing parking spaces.</i>	
If this business is a restaurant, <i>attach copy of Idaho South Central Health District inspection report.</i>	
Number of seats:	Do you have a grease trap: Yes <input type="checkbox"/> No <input type="checkbox"/>
Will you be using or storing grease, oils, chemicals or significant quantities of solvents in your business: Yes <input type="checkbox"/> No <input type="checkbox"/>	
FIRE DEPARTMENT INFORMATION	
Does the building have a: (check the box)	
<input type="checkbox"/> Fire Sprinkler System	<input type="checkbox"/> Fire Alarm System
<input type="checkbox"/> Fire Extinguisher with a minimum 2A:40 B:C rating	<input type="checkbox"/> Knox Box
Has any of the above fire equipment had an annual inspection? If yes, on what date?	
The following fire codes must be met:	
<ul style="list-style-type: none"> • All electrical circuit breakers labeled as to what electrical equipment each breaker controls. • Exit doors and corridors kept free and clear of obstruction or locking devices that require special keys, tools or knowledge to operate during business hours. • Required fire alarm systems must be monitored using two phone lines or other acceptable means. 	
ADDITIONAL INFORMATION	
Will you be manufacturing a product that will have shavings, liquid or solid residues, or require a cooling bath or batch cleaning as part of the process? Yes <input type="checkbox"/> (explain) No <input type="checkbox"/>	
Do you intend to remodel or alter the space in any manner? Yes <input type="checkbox"/> (explain) No <input type="checkbox"/>	
Will you be adding or changing an existing sign for this business? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Will outdoor areas of your business premises or sidewalks in front of your business be used for sales, displays, vending stands, tables, seating or storage? Yes <input type="checkbox"/> (explain) No <input type="checkbox"/>	

Applicant agrees to observe all City ordinances, laws and conditions imposed. Applicant agrees to defend, hold harmless and indemnify the City of Ketchum, its officers and employees from all liability claims, suits and costs arising from incidents or accidents occurring under this permit. Applicant certifies that s/he has read and examined this application and that all information contained herein is true and correct.

Applicant Signature	Date
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Cell Phone	Email
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OFFICIAL USE ONLY		
Date Received:	Fee Paid:	By:
Approved/Denied Date (circle one):	By:	
Account No.:	Sales Tax No.:	
Legal Description:		
Parcel No:	Zone:	
NAICS Code:	Business Activity:	