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CITY OF KENMORE, WA
Marijuana Business License Application



18120 68th Ave NE, Kenmore, WA 98028

425-398-8900

www.kenmorewa.gov

Staff use Area	License Number: _____	Date Stamp
	Application Date: _____	
	Expiration Date: _____	
	Received By: _____	

1 Business Information:

Business Registration Type: New Renewal

Business Address: _____ City,St,Zip: _____

Business Name: _____ Phone: _____

Business Website: _____

DBA Name: _____

Business Address: _____ City,St,Zip: _____

Business Manager Name: _____ Phone: _____

E-mail Address: _____

Universal Business Identifier (UBI): _____

Will flammable or hazardous materials be stored on site? Yes No

If yes, what materials and quantities? _____

Business Ownership: Sole Proprietor Partnership Corporation Association Non-Profit
 Individual Ownership Other: _____

If a partnership, what type? General Limited

Legal name of partnership: _____

Name and address of any registered agent for service of process: _____

Name: _____ Phone: _____

Address: _____ City,St,Zip: _____

If a corporation or limited liability company, specify the following:

Legal name of corporation limited liability company: _____

Date of Incorporation: _____ Place of Incorporation: _____

Name and address of any registered agent for service of process: _____

Name: _____

Address: _____ City,St,Zip: _____

Phone: _____

If a sole proprietorship or individual ownership, please specify the following:

Name: _____
 Address: _____ City,St,Zip: _____
 _____ Phone: _____

2 Property Information:

Property Parcel Number: _____
 Legal Description: _____

Property Ownership: Own Rent or Lease
 Property Owner Name: _____
 Address: _____ City,St,Zip: _____
 Phone: _____ E-mail Address: _____

Property Owner Name: _____
 Address: _____ City,St,Zip: _____
 Phone _____ E-mail Address: _____

If more than two property owners provide separate list of all owners.

3 Applicant Information:

Applicant Name: _____
 Legal Description: _____

Property Ownership: Own Rent or Lease

4 Loans and Leases

Are there any loans, leases, secured transactions and/or repayments related to the business?
 Yes No If yes, attach the terms associated to each agreement.

5 Submittal Requirements

Appl.	Staff		# of Copies
<input type="checkbox"/>	<input type="checkbox"/>	Marijuana business license from Liquor and Cannabis Board	1
<input type="checkbox"/>	<input type="checkbox"/>	Personal/criminal history form of applicants*	1
<input type="checkbox"/>	<input type="checkbox"/>	Fingerprints of applicants*	1
<input type="checkbox"/>	<input type="checkbox"/>	Results of Liquor Control Board criminal history check of applicants*	1
<input type="checkbox"/>	<input type="checkbox"/>	Insurance listing City of Kenmore as additional insured	1
<input type="checkbox"/>	<input type="checkbox"/>	Operating plan submitted to the Liquor and Cannabis Board	1
<input type="checkbox"/>	<input type="checkbox"/>	Two-inch by two-inch color photographs of the applicant and applicant control persons taken within six months of the date of application showing only the full face	1

*An applicant is considered any party of interest of the business and includes all business partners and their spouses

6 Applicant Signature and Date:

I affirm the information above is true and accurate and authorize the City, its officers, employees, and agents to seek information to confirm any information and documents in this application.