



CITY OF MANZANITA

P.O. Box 129, Manzanita, OR 97130-0129
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ci.manzanita.or.us

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BUSINESS LICENSE APPLICATION

Business Name: _____

DBA: _____

Business Type: _____

Cottage Industry: Yes _____ No _____

Business Street Address: _____

Business Mailing Address: _____

Business Phone Number: _____

Business Email Address: _____

Owner: _____ Phone: _____

Other Contact: _____ Phone: _____

License Fee Schedule

Business License fee can be paid here: <https://ci.manzanita.or.us/pay-online/>

	January 1 – June 30 (All Applicants)	July 1 – December 31 (New Licenses or Approved Renewals Only)
_____ One or two employees	\$75.00	\$37.50
_____ Three to five employees	\$100.00	\$50.00
_____ Six or more employees	\$125.00	\$62.50

Employees include owners/managers plus other workers, whether compensated or not, present at one time during peak season. (Ord. 94-8)

Applicant Name: _____ Applicant Job Title: _____

Applicant Signature: _____ Date: _____

Official Use Only-Do not write below this line

City Planner Approval: Yes _____ No _____ N/A _____

Conditional Use Permit Approved by City's Planning Commission: Yes _____ No _____ N/A _____

Payment Date: _____ Receipt/Confirmation No.: _____