

Office Use Only

Treasurer's Copy

Office Use Only

Date Rec. \_\_\_\_\_

CITY OF WASHINGTON, PA

License:  
No. \_\_\_\_\_

Amt. \_\_\_\_\_

**APPLICATION FOR BUSINESS PRIVILEG LICENSE**

Account:  
No. \_\_\_\_\_

**FEE \$100.00**

**Fill In All Spaces Carefully and Type or Print Plainly**

**Payable to: City Treasurer, Dennis L. Adams  
City of Washington  
55 W. Maiden St  
Washington, PA 15301**

\_\_\_\_\_  
**DATE OF APPLICATION**

**Application is hereby made for Business Privilege License as required by City Ordinance No. 847, based on Act 481 of the General Assembly, approved June 25, 1947.**

**1. Business Name** \_\_\_\_\_

**2. Business Address** \_\_\_\_\_  
Street City State Zip

**3. Corp/Home Address** \_\_\_\_\_  
Street City State Zip

**4. If business is conducted by you individually or by partnership under a fictitious name, give names of true owners and date of registration of business under Fictitious Name Act, and trade Name of Business.**

**Date of Starting Business  
Within City Proper**

**Kind of Business**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Approved Zoning Officer

\_\_\_\_\_  
Signature of person making application

\_\_\_\_\_ Approved Fire Chief

\_\_\_\_\_  
Title of person making application

FEDERAL ID NUMBER \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_