

MAIL TO:
 CITY OF SHORELINE TAX
 PO BOX 84226
 SEATTLE, WA
 98124-5526

Shoreline Business License Renewal



For more information contact:
 City of Shoreline
 206-801-2230 clk@shorelinewa.gov

Date Due License Year Account #

Business Name/Address: *

UBI:

Applicant's Current Business Information (update as needed)

Physical Location Address Phone Number Email

- Close Shoreline Business License
- Renew Business License for the City of Shoreline (complete below)

<u>**For Internal Use Only</u>		<u>Code</u>	<u>Amount</u>
	License Fee		
	License Penalty		
	Total Due	88	

Applicant's Signature

Name Email
 Title Phone

I hereby certify that the statements and information provided on this license renewal are true and complete to the best of my knowledge.

Signature Date