



Business License

Home Occupation Permit

The City of Lynden welcomes you as a new member of the business community.

This application must be completed in order to obtain a business license and, if needed, a home occupation permit. Lynden Municipal Code (LMC) 5-02-020 states that “No person shall engage in any business in the City without first having obtained and being the holder of a valid and subsisting license to do so...”

Business License Information

Business licenses are issued for the life of the business operation in the City of Lynden – there is no annual renewal requirement. However, the license is nontransferable – a change in ownership or location will require a new license with fees charged in accord with LMC 5.02-060. All applicants for a business license must have a Washington State Tax Identification Number and may be required to go through a background check.

Approval of a business license usually takes seven to ten working days. The application is routed through various City departments to check items from water and sewer service to zoning, parking requirement and, if necessary, an inspection by the City’s Fire Department. Once the application has been circulated through the departments, the application is forwarded to the Mayor and then the City Clerk for approval.

	Application Fee	Permit Fee	Business License Fee	Total
Business License			\$50.00	\$50.00

If you have questions regarding business license information, **please call (360) 354-4270.**

Home Occupation Permits

Home occupations, such as person, business or professional services or offices, which are conducted within a residential home or existing accessory building require a home occupation permit in addition to a business license. This permit process includes notification of property owners within 300 feet of the property on which the home occupation will be conducted. This process is necessary to evaluate the impacts of a business on the surrounding neighborhood. Certain conditions may be placed on the operation of businesses in residential areas to protect the character and integrity of the surrounding neighborhood.

Approval of a home occupation permit takes a longer period of time to process. Once the completed application is submitted to the Planning Department, a copy of the application (minus Section III), with any conditions proposed by the Planning Department, will be mailed to property owners within 300 feet. Neighbors have up to 15 days to request a public hearing. If no hearing is requested, the permit application process is complete and the business license and home occupation permit can be issued as long as all other requirements are met.

	Application Fee	Permit Fee	Business License Fee	Total
Home Occupation Application	\$50.00	\$25.00	\$50.00	\$125.00

If you have any questions regarding whether or not your business needs a Home Occupation Permit **please call the Planning Department at (360) 354-5532.**

Note: A Peddlers/Solicitors License is required if you plan to solicit private residences.

SECTION 1. – General Information (All Applicants must complete this section.)

Please Print

Business Name:	
Business Owner/Local Representative:	
Last	First MI
Business Address:	
Business Mailing Address:	
Telephone Number:	Email:
Describe your business in detail:	
Opening date of business:	WA State Tax ID # (This is your UBI #)
Is your business within the Lynden City limits?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will your business provide a service within the Lynden City limits? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Service:
Will your business be located within a residential zone? <input type="checkbox"/> Yes <input type="checkbox"/> No	Will you operate your business out of your home? <input type="checkbox"/> Yes <input type="checkbox"/> No

ATTENTION:

If you answered “Yes” to your business being located in a residential zone **or** if your business will be operated out of your home, please complete SECTION 2. If the answers to both questions is “No” proceed to SECTION 3.

SECTION 2. – Home Occupation (If Applicable)

Please Print

Will your business be located in a home or an accessory building? <input type="checkbox"/> Yes <input type="checkbox"/> No If the business is to be located in an accessory building, please attach a sketch showing where the building is located in relation to adjacent properties.
Will the primary function of your business take place on site? <input type="checkbox"/> Yes <input type="checkbox"/> No
What are the proposed hours of business?
Will you be involved in the business? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how?
How many additional employees will you employ?
Do additional employees reside outside the home? <input type="checkbox"/> Yes <input type="checkbox"/> No
Will customers visit your home? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please estimate the number of customers or vehicles expected each day:

Will your business create any type of noise or sounds not normally associated with a residential neighborhood? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how do you propose to mitigate noise impacts to the neighborhood?
Will your business involve distribution of goods? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what means of distribution is proposed (e.g. personal vehicle, business vehicle, courier, UPS, Federal Express, others):

Note: Please attach a list from the Whatcom County Assessor of all property owners within 300 feet of the lot/parcel where business is to be located.

I understand that this permit will be reviewed on an annual basis and changes in the operation of the business may require an additional application or public hearing.

 Applicant's Signature Title for Home Occupation

SECTION 3. – Background Information (All Applicants must complete this section.)
 Please Print

Applicant/Local Representative's Driver's License # _____ State _____ Expiration _____
Applicant/Local Representative's date of birth: _____
Current home address: _____
Previous home address: _____
Have you ever been convicted of a felony: <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a misdemeanor (includes traffic offenses): <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever violated any municipal ordinances: <input type="checkbox"/> Yes <input type="checkbox"/> No

Note: Failure to complete these questions accurately could result in the denial of a license.

If the answer to any of the above statements is "Yes", give a complete description of the nature of the offenses and the disposition thereof:

 Applicant/Local Representative's Signature Date

 Title

SECTION 4. – Administrative Review- City of Lynden Use Only

Please Print

Is this business exempt from Chapter 19.57.040 (A) <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of notification: _____	Was a hearing requested? <input type="checkbox"/> Yes <input type="checkbox"/> No Hearing Date: _____
Home Occupation Permit Approved: (State conditions or reasons for approval)	
Home Occupation Permit Denied: (State reasons for denial)	
_____	_____
Planning Department Signature	Date

	Application Fee	Permit Fee	Business License Fee	Total
Business License	N/A	N/A	\$50.00	\$50.00
Home Occupation	\$50.00	\$25.00	\$50.00	\$125.00
Peddlers/Solicitors License	\$10.00	\$10.00	\$50.00	\$70.00

License Fee Amount Paid: _____ Receipt Number: _____

Investigation/Screening: Please review as indicated and in accordance with City requirements.

Route To	Initials	Date Received	Date Completed	Comments/Findings
Fire Chief				
Planning Director				
Police Chief				
Public Works Director				

Mayor

Comments:

City Clerk

Comments:

License is hereby approved and granted on the basis of the above information and receipt of assessed fees.

Date Issued

License Number