



BUSINESS LICENSE APPLICATION

125 SW E Street, Madras, Oregon 97741

P: (541) 475-2344 F: (541) 475-7061

www.ci.madras.or.us.

[Once completed please email to ar@cityofmadras.us](mailto:ar@cityofmadras.us)

CONTACT INFORMATION

Business Name (including DBA):	Business Telephone Number:	Business Fax Number:
Business Owner(s):	Business Email Address:	
Business Location Address:		
Business Mailing Address and/or Principal Office Address (if different from business location address):		
Name, Title, Email Address and Mailing Address of Local Agent or Representative in Charge of Business within the City of Madras:		
Property Owner Name and Address (if different than business owner):		

ADDITIONAL INFORMATION

Description of the Business (Please list type of good(s) sold and/or services provided): <i>(i.e. retail, manufacturing, restaurant, professional services)</i>		Desired Max Occupants: _____
Number of Employees (including yourself): Full-Time: _____ Part-Time: _____ Temporary: _____	Are any local, city, county, state, and/or federal licenses, certificates, registrations, and/or permits required for the business? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Is this a tax-exempt, non-profit business? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, tax exempt status approval Number: _____ <small>(Please attach to this application a copy of the "Letter of Determination" the business received from the Internal Revenue Service)</small>	If yes, list all such licenses, certificates, registrations, and/or permits:	
Date Business Operations will Commence in the City of Madras:	Contractor License No.: _____	
Home Based Business? Yes <input type="checkbox"/> No <input type="checkbox"/> <small>(please see Madras Community Development Department, may require additional permits)</small>	Contract License Expiration Date: _____	

BUSINESS LICENSE FEES

Select one of the following:

Year-Round License*:	Seasonal License**:	Temporary License**:
For Profit Business – Inside City Limits: <input type="checkbox"/> \$60.00	Mobile Street Vendor: <input type="checkbox"/> \$85.00	<input type="checkbox"/> \$40.00 per day
For Profit Business – Outside City Limits: <input type="checkbox"/> \$65.00	Seasonal Merchant: <input type="checkbox"/> \$40.00/quarter	Food Cart
Non-Profit Business: <input type="checkbox"/> \$0.00	License Transfer***: <input type="checkbox"/> \$25.00	<input type="checkbox"/> \$40.00 by location

The license fee for any Year-Round business license application received after December 31 will be reduced by 50%.

*A conditional use permit may be required with a Home Occupation application.
 ** A temporary use permit may be required with a seasonal or temporary license.
 ***A Zoning Review Application may be required for a new business license.
 **** Building occupancy will be determined by the building official.

If there will be required additional fees and/or applications for business license approval, you will be contacted by a City Official.

FOR OFFICE USE ONLY Date Received: _____ Receipt No.: _____	Amount of Fee Paid: _____ Business License No.: _____
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Please see page 2 for Application Declaration and Required Signatures

This application is a public record. The City of Madras will exempt from disclosure only information of a sensitive and confidential nature to the extent permitted by the Oregon Public Records Law (ORS 192.311-192.338, as amended) and other applicable laws.

City of Madras is an Equal Opportunity Provider

APPLICANT/PROPERTY OWNER DECLARATION

The undersigned Applicant (or authorized agent) hereby declares under penalty of perjury as follows: (a) all information contained in this application is true, accurate, and complete; (b) the business subject to this application is not prohibited by, and is in compliance with, all applicable federal, state, and/or local laws, regulations, and/or ordinances; (c) Applicant has read, understands, and agrees to abide by City of Madras Ordinance No. 849; and (d) if Applicant is an entity, the authorized agent has the requisite power and authority to sign and submit this application on behalf of Applicant.

If Applicant is a foreign person or entity or a non-resident of the State of Oregon and no permanent business location is proposed to be created in the City of Madras, Applicant must (a) appoint a local person, acceptable to the City Administrator, as an agent for accepting service of process, notice, and/or demand, and (b) submit with this application such local person's consent to acceptance of service of process, notice, and/or demand.

Applicant's Signature: _____ Date: _____

Authorized Agent's Signature or Signature of Local Person Service as Agent for Service of Process:
(if applicable)

Name and Address of Authorized Agent: <small>By signing above, the above signed person agrees to serve as agent for the applicant/business subject to this application and will accept service of process, notice, and/or demand on behalf of the applicant/business subject to this application.</small>	Authorized Agent's Signature (if Applicant is an entity):
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Property Owner Name and Signature (consents to business use): _____

FOR OFFICE USE ONLY

This application has been submitted to the City of Madras. Please review the Applicant's data specific to your department and provide comment as appropriate. If necessary, contact the Applicant for further information and/or conduct an informal visual inspection of the business location. Please sign below, indicate approval or state why you disapprove, and provide any additional comments. If you require additional space for your comments, please attach your comments by separate page to this application.

Building Occupancy

Existing Occupancy: _____ Proposed/New Occupancy: _____ No Change to Occupancy

Jefferson County Fire & EMS District: _____ Approve: Yes No
 Signature: _____ Comments: _____
 Date: _____

Jefferson County Community Development Department: _____ Approve: Yes No
 Signature: _____ Comments: _____
 Date: _____

Jefferson County Health Department: _____ Approve: Yes No
 Signature: _____ Comments: _____
 Date: _____

Madras Community Development Department: _____ Approve: Yes No
 Signature: _____ Comments: _____
 Date: _____

Is the location appropriately zoned? Yes No Has site plan been submitted and approved? Yes No
 Is a site plan required? Yes No Is a conditional use permit required? Yes No

Approved Business Type: _____

Madras Finance Department: _____ Approve: Yes No
 Signature: _____ Date: _____ Comments: _____

Madras Public Works Department: _____ Approve: Yes No
 Signature: _____ Date: _____ Comments: _____

Madras Police Department: _____ Approve: Yes No
 Signature: _____ Date: _____ Comments: _____

Madras City Administrator Department: _____ Approve: Yes No
 Signature: _____ Date: _____ Comments: _____

*Jefferson County Community Development and Jefferson County Fire Marshal are only required to sign when business is inside of city limits and in a commercial zoned building.
 **Jefferson County Health Department is required for approval only if food or beverages will be involved in everyday business.
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