



Home Based Occupation/Business Addendum

City of Olympia | Capital of Washington State

Tax and Licensing, P.O. Box 2009, Olympia, WA 98507

This form must be completed in full and returned to the City of Olympia before your business license application can be approved.

Please print clearly

Business Trade Name _____

Business Owner Name(s) _____

Business Physical Address _____

Business Phone No (____) _____

Washington State UBI No. _____

Neighborhood Association _____

Property Owner Name _____

Property Owner Phone No (____) _____ Opening Date of Business in Olympia ____ / ____ / ____

Describe the Business Conducted in the Home: _____

Home Occupations/Businesses Acknowledgement

I hereby swear or affirm under penalty of perjury punishable under Washington law that I have read, understand, and will comply with the Olympia Municipal Code, Title 18, Chapter 18.04 sections relating to home occupations/businesses, and that I reside at the home where the business/occupation will be conducted. I understand that violation of these laws and/or providing false, inaccurate, or misleading information on this form may lead to the loss of my business license and/or other penalties stated in the Olympia Municipal Code and the Revised Code of Washington.

Applicant Name _____ Phone (____) _____

Applicant Signature _____ Applicant Title _____ Date _____