



Business License Application, Carnival

The Department of Local Services, Permitting Division (Permitting) provides business licensing services for unincorporated King County. Only a few specific types of businesses require a King County business license. See [Types of Business Licenses](#) for a complete listing.

How to apply: Submit this completed application form by email to PermitServices@kingcounty.gov. Your application will be screened, and a confirmation email will be sent to you with online payment instructions.

For staff use only License Number:

Incomplete applications will not be accepted.

Application Type			
Carnival: <input type="radio"/> \$40 per day up to 10 units <input type="radio"/> \$100 per day more than 10 units	<input type="radio"/> New Application <input type="radio"/> Renewal Application		
Number of Units:	Date(s) of Event:		
Required Insurance			
<input type="checkbox"/> Attach proof of public liability insurance policy providing for a minimum of \$300,000 bodily injury coverage per occurrence, \$100,000 bodily injury coverage per person, and \$25,000 property damage coverage. Insurance "Accord form" or equivalent.			
Business Information			
BUSINESS NAME		DBA NAME	
BUSINESS ADDRESS	CITY	STATE	ZIP CODE
BUSINESS MAILING ADDRESS <input type="checkbox"/> Same as above	CITY	STATE	ZIP CODE
BUSINESS LICENSE NUMBER:		EXPIRATION DATE:	
EMAIL ADDRESS		PHONE NUMBER	

Business License Application, Carnival, continued

DESCRIBE THE NATURE OF THIS BUSINESS

Select one: Sole Ownership Partnership Corporation

Applicant/Owner/Partners/Officers (must include middle name or initial and DOB)

LAST NAME	FIRST NAME	MIDDLE NAME OR INITIAL
TITLE	DATE OF BIRTH	PLACE OF BIRTH
LAST NAME	FIRST NAME	MIDDLE NAME OR INITIAL
TITLE	DATE OF BIRTH	PLACE OF BIRTH
LAST NAME	FIRST NAME	MIDDLE NAME OR INITIAL
TITLE	DATE OF BIRTH	PLACE OF BIRTH
LAST NAME	FIRST NAME	MIDDLE NAME OR INITIAL
TITLE	DATE OF BIRTH	PLACE OF BIRTH

APPLICANT SIGNATURE OR PRINTED NAME	DATE
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