

Business License Application, Pool Tables

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

Incomplete applications will not be accepted.

License Number:

| Application Type | | | | | |
|------------------|--|---|--|--|--|
| Pool Tables | (\$100 per table per year, maximum of \$500 per establishment) | New Application Renewal Application | | | |
| Number of Po | ool Tables to be licensed: 0 | - | | | |
| | | | | | |

| Business Information | | | | | | | | |
|--|-----|------------------|-------|----------|--|--|--|--|
| BUSINESS NAME | DBA | A NAME | | | | | | |
| BUSINESS ADDRESS | | CITY | STATE | ZIP CODE | | | | |
| BUSINESS MAILING ADDRESS Same as above | | CITY | STATE | ZIP CODE | | | | |
| BUSINESS LICENSE NUMBER: | | EXPIRATION DATE: | | | | | | |
| EMAIL ADDRESS | | PHONE NUMBER | | | | | | |
| DESCRIBE THE NATURE OF THIS BUSINESS | | | | | | | | |

Business License Application, Pool Tables, continued

| Select one: O Sole Ownership | Partnership O | | 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 | | | | | | | | |
| Locations of Pool Tables | | | | | | | | | | |
| BUSINESS NAME | ADDRESS | | # OF TABLES | | | | | | | |
| BUSINESS NAME | NAME ADDRESS | | | | | | | | | |
| BUSINESS NAME | ADDRESS | # OF TABLES | | | | | | | | |
| | | | | | | | | | | |
| APPLICANT SIGNATURE OR PRINTED NAME | DATE | | | | | | | | | |
| | | ' | | | | | | | | |