



**APPLICATION FEE: \$125.00**

Sign Permit: +\$75.00

## **BUSINESS LICENSE APPLICATION OVERVIEW**

- The average processing time for Business License Applications is approximately two weeks.
- The City will do its best to expedite applications, but changes in occupancy, alterations, hazardous materials, or fire and life-safety concerns may require additional time.
- For best satisfaction, it is advisable that Applicants receive approval of their Application prior to leasing or purchasing a unit or building.
- A Business License will be issued when each City Department has given its approval for the Application.
- The previous tenant of the proposed location/space for the new business was a \_\_\_\_\_.
- To help expedite, potential Business License Applicant(s) should meet with the following prior to submittal of their Business License Application to discuss specifics as they pertain to:
  - Community Development Assistant: (208) 788-9815 ext. 2027
    - Discuss whether zoning and proposed use is appropriate for proposed location/space.
  - Building Department: (208) 788-9815 ext. 2027
    - Discuss whether proposed use is a change of occupancy, remodel or alteration. Any of these may require upgrades to meet Code Requirements.
    - Discuss whether proposed improvements/upgrades (permanent walls or built in fixtures) require a Building Permit.
  - Fire Marshall: (208) 788-3147
    - Discuss whether proposed building/use satisfies Fire Code Requirements, such as fire extinguishers/inspections, exit routes and doors/locks, and whether the Hailey Fire Department will need to issue an Operation Permit.



APPLICATION FEE: \$125.00 Sign  
Permit: +\$75.00

## BUSINESS LICENSE APPLICATION

Account #: \_\_\_\_\_  
*Official use only*

**NOTE: IT IS ADVISABLE THAT APPLICANTS RECEIVE APPROVAL OF THEIR APPLICATION(S) PRIOR TO LEASING OR PURCHASING A UNIT OR BUILDING.**

- Incomplete Applications will not be processed and will be returned to the Applicant.
  - A separate license is required for each distinct physical location of your business.
  - If your Business moves to a new location, a new Business License will be required.
    - Additional information may be requested by a City Department as required.
- If your Business is a Food Service Business, a copy of the Idaho South Central health District Permit must be attached.

### BUSINESS BASICS

Business Name: \_\_\_\_\_ DBA \_\_\_\_\_

Physical Address: \_\_\_\_\_ Unit/Suite #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Manager Name: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Business hours: \_\_\_\_ a.m./p.m. \_\_\_\_ a.m./p.m., M O T W O T H O F O S A O S U O

Description of type of business being conducted: \_\_\_\_\_

Square footage of the building/unit/space your business will occupy? \_\_\_\_\_

Total Employees: \_\_\_\_\_ Total FTE \_\_\_\_\_ Estimated Gross Monthly Payroll: \$ \_\_\_\_\_  
*\*For economic development figures.*

Target Opening Date: \_\_\_\_\_ **NOTE: an approved Business License is required prior to opening. The review process takes at least two (2) weeks. Submit Application at least 3-4 weeks prior to target opening date.**

Would you like to be listed on our website? No  Yes

**EMERGENCY CONTACT NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

*Official use only*

RPH \_\_\_\_\_ Legal Description: \_\_\_\_\_ Sub, Block \_\_\_\_\_, Lot \_\_\_\_\_

Property Owner: \_\_\_\_\_ Address \_\_\_\_\_

Zoning District: \_\_\_\_\_ Applicable use category listed in Zoning District: \_\_\_\_\_

Business Activity: (NAICS 6 digit) \_\_\_\_\_ NAICS Activity Description \_\_\_\_\_

Use is:  Permitted  Conditional Use (Permit Req'd)  Prohibited

Parking: On-site parking required for specific use: \_\_\_\_\_ # of parking provided \_\_\_\_\_

Sign Permit:  Approved and on file  Required  N/A

## **PARKING, SIGNS AND USE OF SIDEWALKS**

**Contact:** Community Development (208) 788-9815 ext. 2027

1. How many parking spaces are located on the property where your business is located? \_\_\_\_\_
2. How many other businesses are located in the same building/complex? \_\_\_\_\_
3. Number of existing signs, including other businesses, on the building? \_\_\_\_\_
4. Size of existing signs on the building(s)? \_\_\_\_\_
5. Length of the front the building that your business will occupy? \_\_\_\_\_
6. If you are adding a new sign or changing an existing sign for your business, please attach the following :
  - A Sign Permit Application with required payment.
  - A picture of the building or simple drawing showing the length of the front of the building and the location of the sign on the building property.
  - A color rendering or drawing, including: color(s) of sign, dimensions of all sign faces, descriptions of materials to be used, and manner of construction and method of attachment.
  - For Portable Signs, dimensions of sign and method of weighting/anchoring the sign.
  - For Portable Signs to be located within the Public Right-of-Way, a site plan specifying the Right-of-Way, the adjacent property, and the location of the proposed Portable Sign.
  - A lighting plan for the sign, if applicable.
7. Will any outdoor areas of your business premises or the sidewalk in front of your business be used for sales, displaces, vending stands, tables, seating or storage?

**If yes, please attach a diagram of the business property showing the location of these areas in relationship to pedestrian traffic, parking, ingress, egress, disability access and structures (fences, sheds, building, tents, etc.).**

Please have property owner sign below for any permanent signs to be attached to the principal building.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## BUILDING / FIRE

Contact: Building, (208) 788-9815 x 2027 and Fire Marshall, (208) 788-3147

1. Number of employees? \_\_\_\_\_
2. Do you intend to remodel or alter the exterior or interior space in any manner?  
Yes  No

**If yes, please briefly describe the proposed improvements:**

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**NOTE: A Building Permit will be required for improvements.**

3. Please provide a simple floor plan showing the proposed placement of merchandising stands, racks, furnishings (i.e., desks), temporary walls, etc.  Attached  
 Unknown at this Time

**NOTE: Permanent walls or built-in fixtures will require a Building Permit.**

4. Are you a new tenant in an existing building? Yes  No

**If yes, what type of business are you replacing?** \_\_\_\_\_

**NOTE: A change of occupancy (for example, retail clothing to restaurant), remodel or alteration, may require upgrades to meet Code Requirements.**

### The following Fire Code Requirements must be met:

1. A fire extinguisher having a minimum rating of 2A:20B; C must be installed in a visible and accessible location not to exceed 75 feet of travel distance. All fire extinguishers must be inspected and tagged annually; visual inspections of fire extinguishers are available free of charge through the Hailey Fire Department.
2. All exits and halls leading to the exit must be kept free of all obstructions. All exit door locking devices must be a single action type and cannot require keys or special knowledge to open the exit.
3. Some businesses involving industrial occupations such as welding, painting, etc., require an operational permit. Permits may be obtained through the Hailey Fire Department.

# WASTEWATER

Contact: Wastewater Department, (208) 578-2211

1. Do you or will you discharge anything other than domestic wastewater to the City wastewater system?      Yes       No
  
2. Will you be manufacturing a product that will produce metal or wood shavings, liquid or solid residues, or require a cooling bath or batch cleaning as part of the process?  
Yes       No
  
3. Please check all applicable uses existing currently in your business:  
 Barber or Beauty Shop: # of chairs \_\_\_\_\_ # of stations \_\_\_\_\_  
 Cafe or Restaurant: total # of dining seats \_\_\_\_\_  
 Dentist: # of practitioners' \_\_\_\_\_  
 Laundry: # of washing machines \_\_\_\_\_  
 Manufacturing: type \_\_\_\_\_  
 Hotel / Boarding House: # of rooms with cooking facilities \_\_\_\_\_  
 **Service Station: # of fuel pumps \_\_\_\_\_ # of restrooms \_\_\_\_\_**  
 **Car Wash: # of bays \_\_\_\_\_**  
 **School / Daycare: # of students \_\_\_\_\_**
  
4. List the # of the following: toilets \_\_\_\_\_ sinks \_\_\_\_\_ floor drains \_\_\_\_\_  
If floor drains are present, please describe where they are located:  
\_\_\_\_\_  
Are floor drains connected to sewer \_\_\_\_\_ or dry (shallow injection) well \_\_\_\_\_
  
5. Does your business use a dishwasher or sterilizer?      Yes       No   
If yes, what is the operating temperature? \_\_\_\_\_
  
6. Does your business use a waste food grinder?      Yes       No
  
7. Do you or will you use fats, oils or greases (FOGs) in your business?      Yes       No   
If yes, describe how the spent FOGs are disposed of:  
\_\_\_\_\_
  
8. Are grease, oil or sand traps and/or interceptors present?
  - a) If yes, how often are they cleaned? \_\_\_\_\_
  - b) By whom? \_\_\_\_\_
  - c) Size of traps/interceptors? \_\_\_\_\_
  - d) Location of traps/interceptors? \_\_\_\_\_
  - e) If additives are used to dissolve fats, oils and greases, please list chemicals used  
\_\_\_\_\_
  
9. Do you or will you use chemicals/solvents in your business? \_\_\_\_\_
  - a) Are these chemicals/solvents store on site? \_\_\_\_\_
  - b) Are any of these chemicals/solvents store in containers exceeding five (5) gallon capacity?  
\_\_\_\_\_
  - c) Is there secondary containment provided for these chemicals/solvents? \_\_\_\_\_

**Note: If chemicals are stored in five (5) gallon or larger containers, a copy of the MSDS (Materials Safety Data Sheet) must be provided to the City of Hailey Wastewater Department.**

10. Do you have an Accidental Spill Prevention Plan? \_\_\_\_\_ (if yes, please attach).

*I certify that this document and all attachments were prepared under my direction or supervision, and the information submitted is, to the best of my knowledge and belief true, accurate and complete. Furthermore, I certify that all Fire Code requirements have been met. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment, and/or revocation of City of Hailey Business License, for knowing violation.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Other Items:**

If you are a food related business or childcare business, please contact:

South Central Health District:

(208) 788-4335

State of Idaho Plumbing/HVAC Inspector:

Joel Steen

[Joel.Steen@dopl.idaho.gov](mailto:Joel.Steen@dopl.idaho.gov)

208-358-3506

State of Idaho Electrical Inspector:

Steve Green

[Steve.Green@dopl.idaho.gov](mailto:Steve.Green@dopl.idaho.gov)

(208) 420-7409



## Online Business Directory [haileycityhall.org](http://haileycityhall.org)

This service is provided exclusively to businesses holding a valid City of Hailey business license.

If you are not already listed on the City of Hailey’s online business directory or if you would like to make changes to existing information, please fill out this form and fax it to (208) 788-2924, email it to [planning@haileycityhall.org](mailto:planning@haileycityhall.org) or mail it to the address at the bottom of the page.

**Business Name:** \_\_\_\_\_ **License No.:** \_\_\_\_\_

**Website Address (for linking):** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

1. Check the category for your listing (choose up to three).

- |  |  |
|--|--|
| <input type="checkbox"/> Accounting/Bookkeeping                  | <input type="checkbox"/> Landscape Services                            |
| <input type="checkbox"/> Arts Organizations/Professional Theater | <input type="checkbox"/> Legal Services                                |
| <input type="checkbox"/> Auto, Rentals, Repair & Maintenance     | <input type="checkbox"/> Medical, Dental & Wellness                    |
| <input type="checkbox"/> Auto, Transportation & Shipping         | <input type="checkbox"/> Nightlife & Entertainment                     |
| <input type="checkbox"/> Banks & Financial Services              | <input type="checkbox"/> Pharmacies                                    |
| <input type="checkbox"/> Communications & Technology Companies   | <input type="checkbox"/> Photography & Film Development                |
| <input type="checkbox"/> Community & Civic Organizations         | <input type="checkbox"/> Pool & Spa Suppliers                          |
| <input type="checkbox"/> Construction & Related Services         | <input type="checkbox"/> Property Management, Maintenance, Inspections |
| <input type="checkbox"/> Copy & Office Supplies                  | <input type="checkbox"/> Real Estate & Real Estate Appraisals          |
| <input type="checkbox"/> Custom Furniture and Finishing          | <input type="checkbox"/> Recreation & Fitness                          |
| <input type="checkbox"/> Day Care/Preschools                     | <input type="checkbox"/> Religious Organizations                       |
| <input type="checkbox"/> Dining                                  | <input type="checkbox"/> Salons, Spas & Beauty Services                |
| <input type="checkbox"/> Dry Cleaning, Laundry & Alterations     | <input type="checkbox"/> Shopping                                      |
| <input type="checkbox"/> Florists                                | <input type="checkbox"/> Sporting Goods                                |
| <input type="checkbox"/> Funeral Services                        | <input type="checkbox"/> Thrift Stores                                 |
| <input type="checkbox"/> Galleries, Art Studios & Framing        | <input type="checkbox"/> Utilities                                     |
| <input type="checkbox"/> Groceries & Convenience Stores          | <input type="checkbox"/> Welding & Repair                              |
| <input type="checkbox"/> Hotels/Motels/Inns/Bed & Breakfasts     | <input type="checkbox"/> Wholesalers & Distributors                    |
| <input type="checkbox"/> Insurance                               | <input type="checkbox"/> Other: _____                                  |

2. (Optional) Write a description of your business in 25 words or less.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. (Optional) Email a digital image of your business to [planning@haileycityhall.org](mailto:planning@haileycityhall.org). Please reference your business name or license number in the email.

**Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

# REMINDER

## LOCAL OPTION TAX ADDITIONAL 1% BEGINS JANUARY 1, 2014

**What is the Local Option Tax (LOT)?** Voters approved an additional 1 percent in the November 5, 2013 election (Ordinance No. 1133) in 2 categories, hotel rooms and car rentals. The additional 1% is for 5 years and begins January 1, 2014. An additional 5 year period was passed by voters May 16, 2017 extending from January 1, 2019:

- A four percent (4%) tax on the rental vehicle charge for each rental vehicle rented or leased within the city.
- A four percent (4%) tax on the room occupancy charge for each hotel/motel room or living unit rented or leased within the city, for temporary lodging of thirty (30) days or less.
- A two percent (2%) tax on the sales price of each retail sale of alcohol by the drink within the city.
- A one percent (1%) tax on the sales price of each retail sale of restaurant food within the city.

### **When are taxes paid?**

- Taxes should be paid on the same schedule you pay your State of Idaho sales taxes—if you pay state taxes monthly, your LOT taxes should be paid monthly. If you pay state taxes quarterly, your LOT taxes should be paid quarterly.
- Taxes are paid either monthly or quarterly, and are due on the 25<sup>th</sup> of each month for the previous month or quarter (for example, July's taxes are due August 25; third quarter taxes are due October 25).

### **How do I send tax payments?**

- Returns must be filed even if no tax is due.
- Use a Municipal Non-Property Tax Return form.
- Reference your LOT tax permit # on the form.
- Include a copy of your Idaho State Sales Tax Return.

### **What is the history of Local Option Tax in Hailey?**

- May 23, 2006 voters passed the first Local Option Tax with Ordinance No. 950 for 4 years, effective July 1, 2006.
- November 3, 2009 voters passed and additional 20 years of Local Option Tax with Ordinance No. 1035 beginning July 1, 2010 through June 30, 2030.
- November 5, 2013 voters passed an additional 1 percent for Hotels and Car rentals for 5 years beginning January 1, 2014.
- May 16, 2017 voters passed the additional 1% percent for Hotels and Car rentals for another 5 years beginning January 1, 2019.





# MUNICIPAL NON-PROPERTY SALES TAX PERMIT

|                             |
|-----------------------------|
| Office Use Only:            |
| Assigned Permit No.: _____  |
| Assigned Account No.: _____ |

Required under Ordinance Nos. 950, 1035, and 1212 of the City of Hailey.

Business Name: \_\_\_\_\_

Business Location: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Residence Address: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

Owner Email Address: \_\_\_\_\_

Ownership Type:    Sole Proprietorship        Corporation      
    Partnership        Other (specify)    \_\_\_\_\_

If the ownership is other than sole proprietorship, list below all partners, officers, and directors, principals and/or authorized agents. (Use back of form if more space is required.)

|              |                         |
|--------------|-------------------------|
| <b>Name:</b> | <b>Mailing Address:</b> |
| _____        | _____                   |
| _____        | _____                   |
| _____        | _____                   |

Type of Business: \_\_\_\_\_

The undersigned agrees to collect the following applicable taxes (check all that apply):

- A four percent (4%) tax on the rental vehicle charge for each rental vehicle rented or leased within the city.
- A four percent (4%) tax on the room occupancy charge for each hotel/motel room or living unit rented or leased within the city, for temporary lodging of thirty (30) days or less.
- A two percent (2%) tax on the sales price of each retail sale of alcohol by the drink within the city.
- A one percent (1%) tax on the sales price of each retail sale of restaurant food within the city.

The undersigned further agrees to remit the above municipal tax using the same schedule as required for remittance of taxes to the Idaho State Tax Commission. Tax will be remitted for each calendar month  or each calendar quarter  on or before the 25<sup>th</sup> day of the succeeding month to the City Clerk's Office, 115 Main St. S, Suite H, Hailey, ID 83333.

Proposed Opening Date: \_\_\_\_\_ Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**Applicant Signature:** \_\_\_\_\_

THIS PERMIT IS NONTRANSFERABLE BY SALE, LEASE, ASSIGNMENT OR OTHERWISE.