



New Commercial Business License Application

License Duration: 1 Year \$27.00 3 Year \$54.00 5 Years \$81.00

Business Name: _____ Phone: _____

Business Location: _____

Business Mailing Address: _____

Owner Name: _____ Phone: _____

Owner Mailing Address: _____

Owner Email: _____ Permission to contact via email? Yes No

Please attach a list of names and addresses of any Partners or Officers

Type and Description of Business: _____

Would you like to have your business listed on the City of Kuna website for FREE? If so, please provide the information that you would like listed: Phone Number Address Website* Other: _____

Applicant Signature

Date

← Have you already obtained a Sales/Use Tax Permit with the Idaho Tax Commission? Yes No →

← If your business is food oriented, do you have a Central District Health Certificate or proof of Exemption? Yes No →

REQUIRED

Acquire the 3 (three) signatures of approval below in order OR attach a copy of your Certificate of Occupancy

Kuna Rural Fire District: _____ Date: _____ 150 W Boise St (208) 922-1144	Attach a copy of your Certificate of Occupancy. If you do not have a copy, please contact the Building Department at (208) 922-5546 for signature of verification. _____ Building Dept. Signature & Date
Planning & Zoning Dept: _____ Date: _____	
Zoning: _____ Land Use: _____	
Building Dept: _____ Date: _____	

OFFICE USE ONLY

License #: _____	License Duration: <input type="checkbox"/> 1 Year <input type="checkbox"/> 3 Year <input type="checkbox"/> 5 Year
Date Issued: _____	Expiration Date: _____ Date Fee Paid: _____
Receipt #: _____	Added to Directory? <input type="checkbox"/> Yes <input type="checkbox"/> N/A License Printed? <input type="checkbox"/> Yes
License Approved? <input type="checkbox"/> Yes	Approved By: _____ Date: _____