



City of Fairbanks
 800 Cushman Street
 Fairbanks, AK 99701
 (907)459-6702 or Fax (907)459-6710

**FOR CALENDAR
 YEAR 2011**

Business License Form

NEW CHANGE CHECK IF YOU ARE NO LONGER IN BUSINESS AND SIGN BELOW

IF 2010 GROSS RECEIPTS ARE:	THEN LICENSE FEE IS:	IF 2010 GROSS RECEIPTS ARE:	THEN LICENSE FEE IS:
Place an "X" in the correct box		(Continued from Previous Column)	
\$ 0 - \$49,999 <input type="checkbox"/>	\$25.00	\$10,000,000 - \$19,999,999 <input type="checkbox"/>	\$2,160.00
\$50,000 - \$249,999 <input type="checkbox"/>	\$108.00	\$20,000,000 - \$39,999,999 <input type="checkbox"/>	\$3,240.00
\$250,000 - \$999,999 <input type="checkbox"/>	\$324.00	\$40,000,000 - \$59,999,999 <input type="checkbox"/>	\$4,320.00
\$1,000,000 - \$2,999,999 <input type="checkbox"/>	\$540.00	\$60,000,000 - \$79,999,999 <input type="checkbox"/>	\$5,400.00
\$3,000,000 - \$9,999,999 <input type="checkbox"/>	\$1,080.00	\$80,000,000 and Above <input type="checkbox"/>	\$10,800.00
(Amounts Continued)		Place an "X" in the correct box	

Business Information	Business Name (DBA)		
	Physical Address (Principal Place of Business - List Others on Reverse Side)		
	City	State	Zip Code + 4
	Phone Number		Contact Name
	Email Address		<input type="checkbox"/> Please check here if you would like future renewals or correspondence via EMAIL (Whenever Possible)

Owner Information	AS STATED ON STATE OF ALASKA BUSINESS LICENSE		
	Business License Number		Line of Business/NAICS Code (2 Digit)
	Nature of Business		
	Owner's Full Name		
	Mailing Address		
	City	State	Zip Code + 4

State ESC Information	AS STATED ON STATE EMPLOYMENT SECURITY CONTRIBUTION 2010 QUARTERLY REPORTS											
	Number of Employees on 2010 Employer Security Contribution (ESC) Reports Filed with the State of Alaska: (If no employees, mark with '0's)											
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec

Payment Method	<input type="checkbox"/> CHECK CHECK NO: _____		<input type="checkbox"/> CASH	REMITTANCE AMOUNT:
	<input type="checkbox"/> MC/VISA CREDIT CARD # _____			
	I AUTHORIZE THE CITY OF FAIRBANKS TO CHARGE THE ACCOUNT LISTED ABOVE			EXP: _____
	AUTHORIZED SIGNATURE _____			C V V: _____

Fairbanks General Code provides that failure to register and pay for a business license is punishable by a \$600 fine and/or imprisonment for each offense. Each day of violation constitutes a separate offense. All business licenses expire on December 31. Renewals are mailed in January and do not become delinquent until after March 31st at which time a penalty may apply. Fees and licenses are nontransferable and nonrefundable.

Sign your application and return it to the address above with a check, money order or credit card authorization. Make check payable to the City of Fairbanks.

I hereby state that the information provided is true and complete to the best of my knowledge.

 AUTHORIZED SIGNER

 PRINTED NAME

 TITLE

 DATE