



Town of Twisp

118 S. Glover Street • Box 278 • Twisp, WA 98856 • 509-997-4081 • 509-997-9204

APPLICATION FOR BUSINESS LICENSE or RENEWAL

Fees must accompany application and are non-refundable

The license year runs from January through December. The Twisp business license expires on December 31st. Please note that payment for the renewal of the license must be done on or before January 31st or late fees will be assessed. Non-renewal of the business license does NOT close your license account. You must submit written notice of closing to the address noted above or via email.

Business Name: _____

Mailing Address: _____

Beginning Date of Operation: _____

Physical Address: _____

Town: _____ Zip: _____

Business Telephone: _____

Emergency Contact Number: _____

Kind of Business: Check appropriate descriptions or fill in number

| | | |
|--|-----------------------------------|------------------------|
| Wholesale ___ Retail ___ Real Estate ___ Rental ___ Services ___ Financial ___ Soliciting ___ Other ___ | Home Occupation Yes ___ No ___ | New ___ Renewal ___ |
| Total Number of Employees & working owners | Full-time ___ | Part-time ___ |

Approved by: Planner _____

Detailed Description of Business: _____

Ownership Status: Sole Proprietor ___ Partnership ___ Corporation ___ Non Profit ___

List Owners or Officers Information:

| Name/s | Title | Mailing Address | Telephone # |
|--------|-------|-----------------|-------------|
| | | | |
| | | | |
| | | | |

Federal TIN or SS#: _____ WA State UBI#: _____

.....
 If you purchased this business, did you take over (the entire business ___) or (only a portion of the business ___)

Former Owner Name and Address information: Include telephone if available

As applicant I, _____, certify or declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. All information given is subject to verification with the State of Washington, Department of Revenue.

Print Name _____ Title _____

Signature _____ Date _____

Note: If you are conducting business within the Town Limits of Twisp, Washington you must have a valid business license. Should you have any questions regarding this application, please feel free to contact Town Hall. Thank You.

| Type | Length | Fee |
|-------------------|----------|---------|
| Annual License | 1 year | \$75.00 |
| Home Business | 1 year | \$25.00 |
| Part-Time | 1 week | \$15.00 |
| Part-Time | 1 month | \$25.00 |
| January – October | 1 year | \$75.00 |
| November | Prorated | \$50.00 |
| December | Prorated | \$25.00 |

Business License Check (Business Owner must initial if appropriate)

| | |
|--|--|
| | Received Home Occupation Reference from Zoning Ordinance |
| | Received copy of Sign Ordinance |
| | Received copy of Business License Application |
| | Zoning Ordinance has been reviewed and meets specific criteria |

| |
|---|
| File number _____ Project Name _____ |
|---|

TOWN OF TWISP IMPACT ASSESSMENT CHECKLIST

This checklist is to accompany all land use applications, building permits (with the exception of single-family homes), and business licenses (including home businesses). This checklist is to be used to aid the administrator in determining the nature and extent of impacts of a proposed development within the Town of Twisp based on performance and development standards adopted in the Zoning Ordinance # 601. In developments requiring an Administrative Permit (AP), this checklist must be completed and recorded along with applicable SEPA checklists prior to the Town making any determination.

To be completed by applicant

| | |
|----------------------|-----------------------------|
| Project Title: _____ | Development Location: _____ |
| Applicant Name _____ | Mailing Address _____ |
| Phone number _____ | _____ |

Business Licenses: Applicants renewing business licenses do not need to complete this form unless substantial changes to the primary use of your establishment are anticipated that might affect performance standards. (For example, a cafe currently open only for breakfast and lunch that wants to expand to serve dinners and live music is required to fill this out as this might increase the demand for off-street parking or noise impacts.)

Section 1. General Performance Standards

Please answer the following questions to the best of your ability with *Y* for yes and *N* or No. If Yes is answered, please provide a description as to how the impact will be mitigated on a separate sheet of paper. Please use "*N/A*" for items that are not applicable to your proposal.

| Do you foresee any of the following impacts from your proposed project? | Y, N N/A |
|---|-------------|
| 1. Artificial glare or lighting that might interfere with street traffic or trespass into residential area, including but not limited to strobe lights, arc welding, overhead lighting, or security lights. | |
| 2. Electrical interferences or electromagnetic radiation | |
| 3. Flammable or explosive material | |
| 4. Hazardous substances or waste (storage, emission or manufacture) | |
| 5. Noise | |
| 6. Odor | |
| 7. Please indicate your proposed hours of operation: | |
| 8. Emissions (including dust, ash, or airborne particulates) | |
| 9. Vibration or concussion detectable beyond property lines | |
| 10. Outdoor storage of materials | |

Section 2. Specific Performance Standards

| |
|--|
| Please provide a description that adequately addresses the following elements. |
| 1. Aesthetics: How does your proposal provide aesthetic consistency with the surrounding neighborhood character? |
| 2. Traffic: Will your project generate traffic or affect current traffic patterns? If so, a traffic impact analysis may be required. |
| 3. Parking: Does your project provide adequate off-street parking consistent with the Town of Twisp parking requirements? If you intend to create parking, please describe your proposed surfacing materials, stormwater management plans, how many vehicles and what type of business equipment. |
| 4. Roads and Drives: Does your project propose new roads, driveways or alleys? If so, please provide a description of road dimensions, surfacing materials and stormwater management. |
| 5. Buffers and screening: Do you propose to plant vegetative buffers or screens? If so, please provide site plan with plant list and design. |
| 6. Open Space. Do you propose to leave open space in your project? If so, please provide site plan with location of open space and landscape plan. |
| 7. Utilities: Please list the necessary utility hook-ups required for your project |

Section 3. Development Standards

Please provide information regarding the following elements (if applicable to your project) in the form of writing and/or a site plan where applicable to your project:

- 1. Stormwater plan:** A storm water management plan must be submitted with a development proposal for all uses other than single family dwellings, duplexes, and accessory dwellings. For those uses exempt from this requirement, adequate permeable surfaces must be maintained in yards and setbacks.

2. Dog-control measures. Dog control measures are mandatory for all uses except single-family dwellings, duplexes, accessory structures and home businesses.
3. SEPA checklist if minimum threshold is determined
4. Roof Drainage Easements: If your project results in roof drainage onto neighboring properties, drainage easements are required.
5. Water and Sewer: All new uses must connect to town water and sewer. (If other than a single-family residence, must include information regarding average water use and documentation used to determine this).
6. Heating Ventilation and Air Conditioning Units: Screening of HVAC is required on all commercial and multi-family dwellings.
7. Commercial Access: access to commercial enterprises must be via public right of ways or adjacent commercial properties.
8. Private roads and common areas: management programs for joint ownership and use of roads and common spaces must be recorded on plat or site plan
9. Townhouses: please see zoning ordinance for requirements and provide a site plan
10. Nuisances: any nuisance shall be subject to Title 8.05 of Twisp Municipal Code.

Section 4: Critical Areas

To the best of your knowledge, is your project located in or adjacent to the following natural features? Please answer yes or no, or not sure. The Town of Twisp will make a determination if a Critical Areas Review may be required prior to granting a development permit.

Steep slopes

Wetlands (including seasonally wet areas)

Frequently flooded areas

Wildlife habitat (including upland and/or riparian habitat)

Is there a well on or near your property?

Is there surface water on or near your property?

What is your property currently being used for?

Please provide a description of historical uses of your property if you know them.

To the best of my knowledge, the information provided and any site plan presented depicts accurate information, structure placement, distances, roads, driveways, land features, and other pertinent development information for my proposal.

Applicant Signature

Date

Owner Signature (if other than applicant)

Date