

BUSINESS LICENSE APPLICATION:**INDEPENDENT CONTRACTOR**

This application is for independent contractors (employees not on payroll) including hair stylists, nail technicians, LMTs, etc.



Business License Section
1333 NW Eastman Parkway
Gresham OR 97030-3813
503-618-2370

9.05.05 (3)

(l) A notice that the application is a public record and that the city shall exempt from disclosure information of a personal nature to the extent permitted by the Oregon Public Records and other applicable laws.

Business Information			
Business Name			
Business Address			
Mailing Address			
Business Phone		Fax Number	
E-mail			
Website			
Type of Business			

Contractor Information			
Contractor Name			
License Type		License #	Expiration
Date of Birth		SS. # or Fed ID	
Home/Other Phone		Driver's License #	
Emergency Contact		Emergency Phone	

AMOUNT DUE: \$80

By typing/printing my name, I agree that:

- All information is true, correct and complete based on all information of which I have knowledge. I understand that falsifying any information on this application may result in revocation of the business license.
- I understand the business license is a separate application and not in lieu of or approval for any other licenses or permits which may be required. I understand that all necessary licenses and permits must be obtained and approved by the City of Gresham and all applicable fees must be paid before commencing business.
- The business shall comply with all Federal, State and Municipal laws. Conducting business in violation of these laws or in a manner that constitutes a menace to the public health and safety may result in denial or revocation of the business license.

Business Owner/Rep: _____ **Date:** _____

SUBMITTAL

Online

Email application to: BusinessLicense@GreshamOregon.gov.
Once the application is processed, you will be sent a link and account number for online payment.

Regular Mail/In Person

Mail or deliver application and payment to:
City of Gresham Business Licensing
1333 NW Eastman Pkwy, Gresham, OR 97030

OFFICE USE ONLY:

License #: _____ Paid: Cash / Check / _____