

City of Fairbanks

800 Cushman Street Fairbanks, AK 99701 (907) 459-6702 or Fax (907) 459-6710 Email: cityclerk@fairbanks.us

FOR CALENDAR YEAR 2024

New Business License Form						
NOTE: To renew or make changes to an existing business license, please contact the City Clerk's Office and request a renewal form.						
IF 2023 GROSS RECEIPTS ARE: TI		THEN LICENSE FEE IS:	IF 2023 GROSS RE	CEIPTS ARE:	THEN LICENSE FEE IS:	
	in the correct box \$49,999	\$50.00	(Continued from Previous Column) \$20,000,000 - \$39,999,999		\$3,350.00	
\$50,000 -	\$249,999	\$120.00	\$40,000,000 - \$59	,999,999	\$4,500.00	
\$250,000 -	- \$999,999	\$350.00	\$60,000,000 - \$79	,999,999	\$5,900.00	
\$1,000,000 -	- \$2,999,999	\$580.00	\$80,000,000 - \$99	,999,999	\$11,500.00	
\$3,000,000 -	- \$9,999,999	\$1,125.00	\$100,000,000 - \$119	,999,999	\$16,000.00	
\$10,000,000		\$2,200.00		d Above	\$25,000.00	
(Amoun	ts Continued)		Place an "X" in the	e correct box		
Business Information	Business Name (DBA)*: * Issuance of a business license by the City of Fairbanks confers no rights to the applicant as to any business name. The right to a business name is a matter of state and federal law.					
	Physical Address: (Principal Place of Business - List Others on Reverse Side)					
	City:		State:	Zip Code:		
	Business Mailing Address:					
	City:		State:	Zip Code + 4:		
	Phone Number:		Contact Name:	Contact Name:		
	Email Address: Please check here if you would correspondence via EMAIL (will be correspondence via EMAIL (w			re if you would like future renewals or via EMAIL (whenever possible)		
Owner Information	State Business License Number : (If Applicable)		Line of Business	Line of Business/NAICS Code (2 Digit):		
	Nature of Business:					
	Owner's Full Name:					
	Mailing Address: (If Different from Business)					
	City:		State:	Zip Code + 4	:	
Payment Method	CASH CHECK #: REMITTANCE AMOUNT:					
	UISA / MC / DC CARD #:			EXP:	/ CVV:	
	I AUTHORIZE THE CITY OF FAIRBANKS TO CHARGE THE AMOUNT LISTED ABOVE, AND I UNDERSTAND THAT					
Pay Me	A 2.9% CONVENIENCE FEE WILL BE APPLIED IF I CHOOSE TO PAY WITH A CREDIT OR DEBIT CARD.					
	DDINT NAME AS IT ADDEADS ON CADD					
PRINT NAME AS IT APPEARS ON CARD AUTHORIZED SIGNATURE Fairbanks General Code (FGC) Sec. 14-603 provides that failure to register and pay for a business license is punishable by a \$50 civil penalty, and continued non-compliance						
is punishable as provided in FGC Sec. 1-15. Business licenses expire on the last day of January following the licensing year. If you hold a City business license, you will receive a renewal in January and you should not use this form . Renewals are due the <u>last business day of February</u> . 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. This license will not be processed unless accompanied by payment. You may email or fax your application with credit card authorization (if emailing or faxing, do not also mail in the application). All checks should be made 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		TLE	DATE	