RETAIL/PERSOAL SERVICE SUPPLEMENTAL FORM

This supplemental form applies to retail and personal service uses. This form must be completed and submitted with your business license application.

You may be asked to produce records such as receipts for disposal services or cleaning services associated with storage of chemicals, flammables, and wastewater pre-treatment activities. Please make certain you keep such records.

In addition to the above considerations involving the type of waste produced by your business, certain City departments need specific storage and processing information in order to be able to approve a building for a specific use. Accurately answering the questions below will facilitate the processing of your business license application.

GENERAL

1. Do you use or store any of the following:
   a. Flammable or combustible fluids in quantities greater than 5 gallons?…□ YES □ NO
   b. Compressed gases?…………………………………………………………… □ YES □ NO
   c. Toxic substances?…………………………………………………………… □ YES □ NO
   d. Spray painting equipment?………………………………………………… □ YES □ NO
   e. Welding or chemical processing?…………………………………………… □ YES □ NO
   f. Pesticides?…………………………………………………………………… □ YES □ NO
   g. Dry cleaning solutions?……………………………………………………… □ YES □ NO

2. Do you perform on-site dry cleaning of garments?
   □ YES
   □ NO

3. Do you buy or sell secondhand goods or merchandise?
   □ YES
   □ NO

4. Is your business a personal care service (e.g. beauty or barber shop, cosmetologist, nail salon)?
   □ YES  If yes, how many stations are there: __________
   □ NO

5. Does your business sell or offer adult related merchandise, services or entertainment as defined by Lynnwood Municipal Code 21.02.014?
   □ YES  If yes, please provide a detailed description in a separate written statement.
   □ NO

I/We certify that the information provided in this supplemental form is true and correct to the best of my/our knowledge. This application does not constitute approval of the business license.

Signature of Applicant: _______________________________ Date: _______________