



City of McCall
CITY CLERK

www.mccall.id.us

BUSINESS LICENSE Application

License # 2017- _____

216 East Park Street
McCall, Idaho 83638

Phone 208-634-7142

Fax 208-634-3038

New License Renewal Updated Info

APPLICATION FEE: \$125

RENEWAL FEES: \$25 for (1) year or \$100 for (5) years. Renewal applications due by December 31

The Business License is active for the calendar year, expiring on December 31 of each year. Fees will not be prorated and are non-refundable.

Name of Business: _____

DBA: _____

Owner's Name(s): _____ Phone: _____

Business Physical Location: _____

Business Mailing Address: _____

Address for License/Tax Correspondence if different from above: _____

Contact Person: _____ Phone: _____

Email: _____

Preferred method of correspondence: Email Postal Service

Type of business being conducted: _____

EIN#: _____ State Sales Tax#: _____

- Type of Ownership:
- | | |
|---|--|
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> Limited Liability Partnership (LLP) |
| <input type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Liability Company (LLC) |
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Limited Partnership (LP) |
| <input type="checkbox"/> Other (specify): _____ | |

If ownership is other than sole proprietorship, list below all partners, officers, principals, and/or authorized agents with address and phone numbers (attach additional page if needed):

>> Continued on page 2 >>

For City Use Only

Land use compliance:

NAICS Code: _____ Zone: _____ P & Z Approval (App # or Date): _____

Approved Denied Reason for Denial: _____

Signatures:

Community Development Dir.: _____ Date: _____

Bldg. Inspector (if change in location or use): _____ Date: _____

Fire Chief: _____ Public Works Dir.: _____

Reported to: Co. Dispatch Chamber City Council Date Issued: _____

Please answer the following questions. Supplemental applications may be required as indicated below.

GENERAL INFORMATION

- 1. Is there on-site parking? If yes, how many spaces? _____ Yes No
- 2. Is the property served by city sewer or on a private septic system? For septic systems, contact Central District Health for approval. City sewer
 Private septic system
- 3. Will any changes be made to the **interior** of the building? Yes No
- 4. Will any changes be made to the **exterior** of the building? If yes, Planning & Zoning requires a **Design Review**. Yes >> Design Review
 No
- 5. Will you be using or storing grease, oil, chemicals, or significant quantities of solvents in your business? (Note: MSDS sheets are required to be kept on-site as required by Code.) Yes No
- 6. What is the maximum seating capacity of the business? _____
- 7. Is this a childcare business? Number of Children _____ (a total of 7+ requires a State License) Yes No
Receiving compensation for _____ of children. (6+ children requires a City Planning & Zoning Conditional Use Permit) **State License Number (if applicable)** _____
- 8. Is this a "formula" (chain) retail or restaurant business according to McCall City Code 3.2.02? Yes No
- 9. Will any sign(s) for this business be added or changed? If yes, Planning & Zoning requires a **Sign Permit**. Yes >> Sign Permit
 No
- 10. Does this business offer snow removal services? If yes, a supplemental **Snow Removal License** is required. Yes >> Form 105
 No
- 11. Will alcohol be sold or served? If yes, a **City Alcohol License** is required. Yes >> Form 107
 No
- 12. Does your business collect sales tax? If so, how often do you remit taxes to the State? Yes >> Monthly
 No Quarterly
 Annually

LODGING & SHORT TERM RENTALS

- 13. Is this a **Lodging business** (hotel or short-term rental)? An **Occupancy LOT Tax Permit** is required. (Attached) Yes >> Form 302
 No
 - a. If this is a short-term rental with sleeping arrangements for 20 or more persons in a residential zone, a **Conditional Use Permit** from Planning & Zoning is required. Yes >> Conditional Use Permit
 No

Fire Safety Guidelines

1. A fire extinguisher with a minimum rating of 2A:40B:C should be installed in a readily accessible and visible location on the business premises and inspected by a qualified technician within the last 12 months (other fire/safety requirements may be needed).
2. Electrical circuit breakers should be labeled for the electrical equipment they control.
3. Exit doors and corridors should be kept free and clear of obstructions or locking devices which require special keys, tools, or knowledge to operate during business hours.
4. Smoke and carbon monoxide detectors are required for commercial and residential buildings with fuel burning appliances.

Please contact the McCall Fire District for more info or questions concerning safety requirements at (208) 634-7070.

Sales Tax Collection Agreement

The Applicant agrees to collect the following applicable taxes (**please initial below**):

_____ Retail Businesses to collect a one percent (1%) tax upon all other retail sales subject to taxation under Idaho Code 63-3601, et. Seq. Idaho Sales Tax Act except on the sale of groceries and motor vehicles which are titled by Idaho Department of Motor Vehicles as defined in McCall City Code 4.11.

_____ Lodging/Short Term Rentals to collect a total of (7%) tax - six percent (6%) Local Option Occupancy (LOT) tax and a (1%) Sales tax - on short-term rentals or leasing occupancy fees charged for any hotel room, motel room, condominium, home, room, or other residential unit where the term of stay is less than thirty days as defined in McCall City Code 4.11 and 4.12.

_____ The Applicant further agrees to remit the above municipal taxes for each calendar month, calendar quarter, or annually on or before the 20th of the succeeding month to the City Clerk's Office at City Hall, 216 E Park Street, McCall, Idaho 83638.

_____ The Applicant hereby makes application for a City Sales Tax Permit as required per McCall City Code Title 4.11 and 4.12. **THIS PERMIT IS NONTRANSFERABLE BY SALE, LEASE ASSIGNMENT, OR OTHERWISE.**

_____ The undersigned agrees to maintain a **current business license** for each calendar year while the business / short-term rental is operational.

Please sign acknowledging that you have read the application in its entirety and that all information provided is accurate to the best of your knowledge.

Applicant's Signature – REQUIRED

Print Applicant's Name

Position

Applicant's Signature

Date



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OCCUPANCY TAX PERMIT Addendum

Form 302

216 East Park Street
McCall, Idaho 83638

Phone 208-634-7142

Fax 208-634-3038

For Accommodators of Hotels and Short-Term Rentals

Name of Accommodator: _____

Contact Name

(Manager, Controller, etc.): _____

- New Account
- Updated Info

Phone: _____ Email: _____

Alternate Phone or Email: _____

Type of Business:

- Hotel/Motel
- Condominium
- Bed & Breakfast
- Property Management/Vacation Rental
- Other (specify): _____

State of Idaho Travel and Convention Tax Permit Number: _____

Note: Copies of Travel and Convention returns must be submitted with monthly or quarterly Local Option Tax payment vouchers.

What frequency do you file your Travel and Convention returns to the Idaho State Tax Commission?

- Monthly
- Quarterly
- Other (specify): _____

What frequency would you prefer to remit the Local Option Occupancy Tax?

- Monthly
- Quarterly

Please list the address of each short-term rental property **within City Limits** that your business will be operating. A permit will be issued for display at each property. Attach additional pages as necessary.

Address

Sleeps how many?

Business License Number: _____ *For City Staff Use* Date Assigned: _____



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Form 103

216 East Park Street
McCall, Idaho 83638

Phone 208-634-7142

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McCall Businesses Emergency Contact Information

The McCall Police Department maintains emergency contact information for local businesses. This information is necessary for the McCall Police Department to provide a high level of service to its customers.

In the event of an after-hours emergency, the police may have to contact business key holders. In addition to names and phone numbers we are asking for e-mail addresses. The police department will use e-mail to alert businesses of fraudulent practices, counterfeit bills and other information of interest to local businesses.

Please assist us by completing the following information and return it to the City Clerk's office with your business license application.

Business Name: _____

Business Owner's Name: _____

Physical Address: _____

Mailing Address: _____

Business Phone: _____ E-mail Address: _____

After hours / Emergency contact information

Name: _____ Phone _____

Address: _____

Name: _____ Phone _____

Address: _____

Name: _____ Phone _____

Address: _____

Thank you for your time and effort,

Justin Williams
Chief of Police

216 East Park St. • McCall, Idaho 83638 • 208-634-7144 • fax 208-634-7983 • police@mccall.id.us