



City of Lafayette

BUSINESS REGISTRATION FORM

486 Third Street
P.O. Box 55
Lafayette, OR 97127
Phone: (503) 864-2451
Fax: (503) 864-4501
www.ci.lafayette.or.us

Please Complete All Items

Doing Business As (DBA) Name

Registered Business Name (if different)

Physical Location of Business

Mailing Address

Business Phone Number

City State Zip

Secondary Phone Number

Email Address

Business Owner

Phone Number

Business Owner/Emergency Contact

Phone Number

Type / Nature of Business

Is this a new business: Yes No Is this a home occupation: Yes No Home Occp. # _____

Does your business have an alarm system? Yes No

Alarm Company: _____

Monitored By: _____ Phone: _____

Registrant understands that this Business Registration is provided pursuant to Chapter 7 of the Lafayette Municipal Code. Approval by the City does not certify or exempt the registrant from compliance with any local, state, or federal business regulation, land use law, or building code requirement.

Signature of Business Owner

Date

This business is no longer active in Lafayette, as of: _____ . Please remove this business from your records. I understand that if business activities are to resume, a new registration will be required.

Mail completed form and \$10.00 registration fee to: City of Lafayette, P.O. Box 55, Lafayette, OR 97127, or bring the completed form and \$10.00 registration fee to Lafayette City Hall located at 486 3rd Street in Lafayette. Please call (503) 864-2451 during business hours, Monday through Friday 8:00 am to 5:00 pm, if you have any questions.

FOR OFFICE USE ONLY:

License # _____ Date Received: _____ Fee Paid: _____

Zoning: _____ Approved Use: Yes No Change in Use: Yes No

Registration Approved / Denied: _____ Staff: _____