



THE STATE
of **ALASKA**
Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing

BUS

FOR DIVISION USE ONLY

Department of Commerce, Community, and Economic Development
Division of Corporations, Business and Professional Licensing
Business Licensing Section
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Business License: Reduce Multiple Licenses

AS 43.70.020(f) and 12 AAC 12.030

This application is used to reduce the number of current multiple business licenses *with the exact same owner(s)*. As a result of this filing one (1) business license will remain and continue to exist; the other business licenses *with the exact same owner* will be cancelled. To qualify, all businesses involved must have the exact same owner(s).

IMPORTANT Potential Business Impact: You are strongly encouraged to research and consider any business impact before reducing multiple business licenses to one. For example, a professional license with this division, your business registration with other agencies such as local government, municipalities, federal government, IRS, etc. You are advised to seek the services of an attorney, accountant, or other qualified professionals.

Online Filing is not available for this form; submit this form by fax or mail only. **DO NOT** email this form or payment.

Processing Time: Standard processing time from March-September is 10-15 business days. During heavy business license filing seasons, October-February, the processing time will be delayed. Filings are reviewed in date order received. We do not offer expediting services.

No Fee:	<input type="checkbox"/> There is no fee associated with this filing.	\$0.00
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1. The one (1) Business License which will continue to exist:

Business Name (*must exactly match name on business license*):

Business License Number (*mandatory*):

Mailing Address for the one business license continuing to exist:

Physical Address for the one business license continuing to exist:

2. NAICS Codes for the one business license which will continue to exist: AS 43.70.020(a)(2)and (d)

Choose NAICS Codes which best describes what will be the primary and secondary lines of business for the surviving business license listed in Part I.

If any business activity requires a professional license based on the NAICS Code, then these activities must be listed as the primary and secondary NAICS Codes and the professional license number(s) must be provided.

You may provide up to ten (10) NAICS Codes. Use a separate sheet of necessary.

Primary NAICS Code:
(mandatory)

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Professional License #:
(if applicable)

Secondary NAICS Code:
(if applicable)

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Professional License #:
(if applicable)

3. Business License(s) to be cancelled:

Important: If there are any tobacco endorsements on any of the below cancelled business licenses then the tobacco endorsements will be cancelled at the same time. To add tobacco endorsements to the business license listed in Item #1, you must submit a new tobacco endorsement application (Form 08-4730) and pay the appropriate fees. New tobacco endorsements must apply by hardcopy.

Business names must match name on business license certificate

Business License # (mandatory)

1.

2.

3.

4. Signature

The request to reduce multiple business licenses must be signed by the exact same owner of all the businesses. All business licenses listed on this form **MUST** have the exact same owner(s).

- If the business is a sole proprietor, then the sole individual owner must sign.
- If the business is a partnership, then one of the owning partners must sign.
- If the business is owned by an entity, then the signer must be on the record with this office as an authorized signer for the owning entity and identify their signing authority, such as: corporation President or LLC member. Example: John Doe, President of owning entity XYZ Incorporated.

By my signature below, I declare under the penalty of perjury that the information provided on the application

Signature of Owner: _____ **Date:** _____

Printed Name of Owner: _____

Title of Owner: _____

(Provide title based on the type of organization, such as; Sole Proprietor, Partner, or President of <owner entity name>, etc.)