

Applying for a License

Login to the Online Portal through Accela Citizen Access (ACA)

Visit: <https://aca-prod.accela.com/maplewood>

Accessibility Support Register for an Account Reports (1) Login

Search...

Home Building Planning Enforcement Licenses Complaints Public Works

Advanced Search ▾

Welcome to the new Citizen Portal
We are pleased to offer our citizens, businesses, and visitors access to government services online, 24 hours a day, 7 days a week.

In partnership with [Accela, Inc.](#), we are fulfilling our promise to deliver powerful e-government services and provide valuable information about the community while making your interactions with us more efficient, convenient, and interactive. To use ALL the services we provide you must register and create a user account. You can view information, get questions answered and have limited services as an anonymous user. We trust this will provide you with a new, higher level of service that makes living and working in our community a more enjoyable experience.

What would you like to do today?
To get started, select one of the services listed below:

| | |
|--|--|
| Building Search Applications Schedule an Inspection | Planning Search Cases |
| Enforcement Enter a Complaint | Licenses Search Applications |
| Complaints Enter Complaint/Request for Service | Public Works Search Applications Schedule an Inspection |

Login

User Name or E-mail:

Password:

Login ▶

Remember me on this computer
[I've forgotten my password](#)
[New Users: Register for an Account](#)

After you log in you will see your user **Dashboard**. Select the Licenses tab and, Apply for a License

Search...

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Apply for a License Search Applications

Read the disclaimer and Accept to continue.

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Apply for a License Search Applications

Online License Application

Welcome to our Online Licensing System. Using this system you can submit information, pay fees, and track the status of your application all from the convenience of your home or office, 24 hours a day.

Please "Allow Pop-ups from This Site" before proceeding. You must accept the General Disclaimer below before beginning your application.

Option to Sign Up for Email Notification of Proposed Ordinances

The City of Maplewood now offers an electronic *Notify Me* service for users to request notifications on various activities happening at the City. One of the notifications available is for a *proposed new ordinance or a proposed amendment to an ordinance*, which could help you stay up-to-date on changes made by City Council that may affect the operation of your business or a license you hold.

I have read and accepted the above terms.

[Continue Application »](#)

Select the desired License Record Type from the drop-down options provided. If you know the name of the license you are applying for, you may also search for it using the Search Bar

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Apply for a License Search Applications

Select a License Record Type

First select the category of license you are applying for, then choose one of the listed available license application types. For assistance or to apply for a record type not listed below please contact us.

 [Search](#)

- ▶ Business License
- ▶ Contractor License
- ▶ Rental Property License

[Continue Application »](#)

Complete the application providing the information requested (for this example “Lodging Establishment Application” has been selected). At any time you may select *Save and Resume Later*.

[Enter the Doing Business As \(DBA\) Name](#) - This should be the name of the business operating in Maplewood, for which the license is being applied for.

Lodging Establishment Application

| | | | | | | |
|----------------------|------------|------------------|------------------------|---------------|---|---|
| 1 Address & Contacts | 2 Business | 3 Tax ID Numbers | 4 Workers Compensation | 5 Attachments | 6 | 7 |
|----------------------|------------|------------------|------------------------|---------------|---|---|

Step 1: Address & Contacts > Address

* Indicates a required field.

Detail Information

Doing Business As (DBA) Name:

[Enter the Property Address](#) - This should be the address of the business to be licensed in Maplewood or— if applying for Mobile Food Unit, Courtesy Bench or Solid Waste Collection licenses—the registered address for the business applying for the license.

If a Maplewood address, please search only for the Street No. and select *Search*. For non-Maplewood addresses, please provide the full address and select *Continue Application*

Maplewood Property Address

Enter your business address and click Search to find the address record in the agency database. **For best results, start by searching only the Street No.**

| | | | |
|----------------------|------------|----------------------|--------------|
| * Street No.: | Direction: | * Street Name: | Street Type: |
| <input type="text"/> | --Select-- | <input type="text"/> | --Select-- |
| Unit No.: | Unit Type: | | |
| <input type="text"/> | --Select-- | | |
| City: | State: | * Zip: | |
| <input type="text"/> | --Select-- | <input type="text"/> | |

Once you’ve searched by the Street No, select the correct address from the list of results, if applicable. Verify the address that populates the fields is correct before selecting *Continue Application*.

Enter Contact Information - If the Applicant is the registered user who is logged in, please use the *Select from Account* button to autofill from the user account. If the contact is *not* the registered user, select *Add New* to enter new information. Once the contact information is entered, select *Continue Application*.

| | | | | | |
|----------------------|------------|------------------------------|----------------------------|----------|---|
| 1 Address & Contacts | 2 Business | 3 State Statute Requirements | 4 Supplement Documentation | 5 Review | 6 |
|----------------------|------------|------------------------------|----------------------------|----------|---|

Step 1: Address & Contacts > Contacts

* indicates a required field.

Applicant

Please provide contact information for the *individual applying for this license*.

***This individual will be the one receiving email updates on the status of this application, in addition to renewal notifications prior to expiry of the license.**

[Select from Account](#) [Add New](#)

[Continue Application »](#) [Save and resume later](#)

Enter the Business Information – The questions in the screen-shot below depict basic information requested on all applications. Depending on the license type, there may be additional questions to be completed in this step.

| | | | | | | |
|----------------------|------------|------------------|------------------------|---------------|---|---|
| 1 Address & Contacts | 2 Business | 3 Tax ID Numbers | 4 Workers Compensation | 5 Attachments | 6 | 7 |
|----------------------|------------|------------------|------------------------|---------------|---|---|

Step 2: Business > Business

* indicates a required field.

Business

BUSINESS INFORMATION

Provide the information for the Maplewood location to be licensed.

* Name of Business:

* Doing Business As:

* Phone Number:

E-Mail Address:

Website:

* Property is:

* Business Ownership:

[Continue Application »](#) [Save and resume later](#)

Enter Business Owner Information – Please provide contact information for each individual having ownership in this business. If no individual owner, you can leave this section blank and continue to the next page.

OWNER/PARTNER

Provide the contact information below for each individual having ownership in the business.

Showing 0-0 of 0

| First Name | Last Name | Phone Number | Email Address | Percent Ownership |
|-------------------|-----------|--------------|---------------|-------------------|
| No records found. | | | | |

[Add a Row](#) [Edit Selected](#) [Delete Selected](#)

[Continue Application »](#)

[Save and resume later](#)

Tax Identification Numbers - If the license is for a business, these numbers should be the Federal and State Tax ID numbers for the business. If the license is for an individual, or you are a sole proprietor and do not have business Tax ID numbers, you can provide your Social Security Number as your Tax ID number.

| | | | | | |
|----------------------|------------|------------------------------|----------------------------|----------|---|
| 1 Address & Contacts | 2 Business | 3 State Statute Requirements | 4 Supplement Documentation | 5 Review | 6 |
|----------------------|------------|------------------------------|----------------------------|----------|---|

Step 3: State Statute Requirements > Tax ID or SSN

MN §270C.72 requires the licensing authority to, upon request, provide to the Minnesota Commissioner of Revenue the business identification number **OR social security number of each license applicant.*

* Indicates a required field.

Tax ID Number

TAX ID NUMBER

Federal Tax ID:

MN State Tax ID:

Social Security Number:

[Continue Application »](#)

[Save and resume later](#)

Workers' Compensation – Provide information about any workers' compensation insurance. If you are Self-Insured you must upload a copy of your *permit to self-insure* in the next step (Attachments)

Step 4: Workers Compensation > Workers Compensation

**MN §176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of MN §176.181, Subd.2. Upon request, the information will be furnished to the Department of Labor and Industry.*

* indicates a required field.

Workers Compensation

WORKERS COMPENSATION

I carry Workers' Compensation Insurance:

Policy Number:

Effective Date:

Expiration Date:

I am Self-Insured and have attached a copy of the permit to self-insure:

By law, I am not required to have workers' compensation liability coverage:

[Continue Application »](#)

[Save and resume later](#)

Upload Document Attachments (if applicable) – Each license type has a different set of documents that may be required to be submitted with the application. Please review the requirements for your license type in advance to ensure you know what is needed, as required documents must be uploaded before you can submit your application. If necessary, you can save your application and return to it to add additional information or documents at a later time.

| | | | | | |
|---|------------|------------------------------|----------------------------|----------|-------------------|
| 1 | 2 Business | 3 State Statute Requirements | 4 Supplement Documentation | 5 Review | 6 Record Issuance |
|---|------------|------------------------------|----------------------------|----------|-------------------|

Step 4: Supplement Documentation > Attachments

* indicates a required field.

Please upload a copy of the following document(s):

Certificate of Insurance ([SAMPLE](#)); minimum amounts of coverage should be as follows:
- \$300,000 General Liability
- \$100,000 Property Damage

Workers Compensation *Permit to Self-Insure* (if applicable)

The maximum file size allowed is 1000 MB.
ade;adp;ba;chm;cmd;com;cpt;exe;hta;htm;html;ins;isp;jar;js;se;lib;lnk;mde;mh;mh;htm;msc;msp;msi;php;plf;scr;sc;shb;sys;vb;vbe;vbs;vxd;wsc;wsf are disallowed file types to upload.
This application type requires you to submit the following types of documents. Subject to the collected information, you may be required to submit additional documents prior to approval.
CERTIFICATE OF INSURANCE

| Name | Type | Size | Latest Update | Action |
|-------------------|------|------|---------------|--------|
| No records found. | | | | |

[Add](#)

[Continue Application »](#)

[Save and resume later](#)

To upload documents, select *Add*. A box will pop up for you to select your file. Select *Add* again and you can search for your document.

File Upload ×

The maximum file size allowed is 1000 MB.
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;js;jse;lib;lnk;mde;n are disallowed file types to upload.

| | |
|---------------------------|------|
| Permit to Self Insure.pdf | 100% |
|---------------------------|------|

[Continue](#) [Add](#) [Remove All](#) [Cancel](#)

Once you have selected the correct file to upload, add a “description”, select *Save* and *Continue Application*

Attachment

Upload a copy of the following document(s):
Workers Compensation *Permit to Self Insure* (if applicable)

The maximum file size allowed is 1000 MB.
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;js;jse;lib;lnk;mde;mht;mhtml;msc;msp;mst;php;pif;scr;sc;shb;sys;vb;vbe;vbs;vxd;wsc;wsf;wsh are disallowed file types to upload.

| Name | Type | Size | Latest Update | Action |
|-------------------|------|------|---------------|--------|
| No records found. | | | | |

*Type: PERMIT TO SELF-INSURE [Remove](#)

File:
Permit to Self Insure.pdf
100%

*Description:
Permit to Self-Insure

[spell check](#)

[Save](#) [Add](#) [Remove All](#)

[Continue Application »](#)

[Save and resume later](#)

Review – Scroll through to the bottom to verify all information provided on the application and complete and correct.

| | | | | | | |
|---|---|------------------|------------------------|---------------|----------|-------------------|
| 1 | 2 | 3 Tax ID Numbers | 4 Workers Compensation | 5 Attachments | 6 Review | 7 Record Issuance |
|---|---|------------------|------------------------|---------------|----------|-------------------|

Step 6: Review

[Continue Application »](#)

[Save and resume later](#)

Please review all information below. Click the "Edit" buttons to make changes to sections or "Continue Application" to move on. You must check the box to agree to the certification at the bottom of the page before you can continue.

Record Type

Lodging Establishment Application

Once you have read the certification at the bottom of the page, check the box and select *Continue Application*. This will **submit the application** and a confirmation notification will appear.

The data in this application will be used to approve your license and shall be deemed public unless private by State Statute. Private data is available to you and the City or State staff who need this information to perform their duties, but is not available to the public. You are not legally required to provide this data, but the City may not be able to approve your license if you do not provide it.

I will familiarize myself with the provisions of the Maplewood City Code, and with applicable Minnesota Statutes and federal regulations. This business will be conducted in compliance with the above regulations, statutes and ordinances, and it is understood that failure to do so may constitute grounds for denial, suspension or revocation of this license.

By checking this box, I agree to the above certification.

Date:

[Continue Application »](#)

[Save and resume later](#)

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Lodging Establishment Application

| | | | | | | |
|---|---|------------------|------------------------|---------------|----------|-------------------|
| 1 | 2 | 3 Tax ID Numbers | 4 Workers Compensation | 5 Attachments | 6 Review | 7 Record Issuance |
|---|---|------------------|------------------------|---------------|----------|-------------------|

Step 7: Record Issuance

 Your application has been successfully submitted

Thank you for using our online services.

Your **Record Number** is

You will need this number to check the status of your application.

Your application will not be complete until you have submitted all required supporting documentation. Please visit our website for additional information.

[View Record Details »](#)

Once you have submitted your application, please monitor the email you provided, as this is how you will be notified when the license fee is ready to be paid, or if additional information is needed to process the application.

You may visit <https://aca-prod.accela.com/maplewood> to check the status of your application at any time.